| Fill in this information to identify your case: |                               |                                 |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                               |                                 |
| DISTRICT OF MARYLAND                            | -                             |                                 |
| Case number (if known)                          | Chapter you are filing under: |                                 |
|   | Chapter 7                     |                                 |
|   | ☐ Chapter 11                  |                                 |
|   | ☐ Chapter 12                  |                                 |
|   | ☐ Chapter 13                  | Check if this an amended filing |

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | t 1: Identify Yourself   |  |   |
|----|--|--|---|
|    |  | About Debtor 1:                          | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name   |  |   |
|    | Write the name that is on  | Timothy                                  |   |
|    | your government-issued picture identification (for   | First name                               | First name                                    |
|    | example, your driver's   | Thomas                                   |   |
|    | license or passport).  | Middle name                              | Middle name                                   |
|    | Bring your picture   | Wharton, Jr.                             |   |
|    | identification to your meeting with the trustee.   | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III)      |
| 2. | All other names you have used in the last 8 years  |  |   |
|    | Include your married or maiden names.  |  |   |
| 3. | Only the last 4 digits of<br>your Social Security<br>number or federal<br>Individual Taxpayer<br>Identification number<br>(ITIN) | xxx-xx-4103                              |   |

Case number (if known)

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |  |  |  |  |
|----|--|---|--|--|--|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs.  Business name(s)  EINs  | ☐ I have not used any business name or EINs.  Business name(s)  EINs   |  |  |  |  |
| 5. | Where you live   | 23 Mule Deer Court  | If Debtor 2 lives at a different address:  |  |  |  |  |
|    |  | Elkton, MD 21921  Number, Street, City, State & ZIP Code  | Number, Street, City, State & ZIP Code   |  |  |  |  |
|    |  | Cecil   |  |  |  |  |  |
|    |  | County  | County   |  |  |  |  |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |  |  |  |  |
|    |  | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code   |  |  |  |  |
| 6. | Why you are choosing this district to file for   | Check one:  | Check one:   |  |  |  |  |
|    | bankruptcy   | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |  |  |  |  |
|    |  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)   |  |  |  |  |
|    |  |   |  |  |  |  |  |

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Case number (if known)

| 7.  | The chapter of the<br>Bankruptcy Code you are<br>choosing to file under   | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. |             |                                      |  |   |  |  |  |
|-----|---|---|-------------|--------------------------------------|--|---|--|--|--|
|     | choosing to file under  | ■ Chap  | oter 7      |                                      |  |   |  |  |  |
|     |   | ☐ Chap  | oter 11     |                                      |  |   |  |  |  |
|     |   | ☐ Chap  | oter 12     |                                      |  |   |  |  |  |
|     |   | ☐ Chap  | oter 13     |                                      |  |   |  |  |  |
| 8.  | How you will pay the fee  | ab<br>or  | out how yo  | ou may pay. Typi<br>attorney is subm | cally, if you are paying the fee yo                      | with the clerk's office in your local court for more detai<br>urself, you may pay with cash, cashier's check, or mone<br>alf, your attorney may pay with a credit card or check wit |  |  |  |
|     |   |   |             |                                      | allments. If you choose this optio (Official Form 103A). | n, sign and attach the Application for Individuals to Pay   |  |  |  |
|     |   | only if you are filing for Chapter 7. By law, a judge may<br>our income is less than 150% of the official poverty line the  |             |                                      |  |   |  |  |  |
|     |   | ар  | plies to yo | ur family size and                   | d you are unable to pay the fee in                       | installments). If you choose this option, you must fill outial Form 103B) and file it with your petition.   |  |  |  |
| 9.  | Have you filed for bankruptcy within the last 8 years?  | ■ No.   |             |                                      |  |   |  |  |  |
|     |   |   | District    |                                      | When   | Case number   |  |  |  |
|     |   |   | District    |                                      | When   | Case number   |  |  |  |
|     |   |   | District    |                                      | When   | Case number   |  |  |  |
| 10. | Are any bankruptcy cases pending or being   | ■ No  |             |                                      |  |   |  |  |  |
|     | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? | ☐ Yes.  |             |                                      |  |   |  |  |  |
|     |   |   | Debtor      |                                      |  | Relationship to you   |  |  |  |
|     |   |   | District    |                                      | When   | Case number, if known   |  |  |  |
|     |   |   | Debtor      |                                      |  | Relationship to you   |  |  |  |
|     |   |   | District    |                                      | When   | Case number, if known   |  |  |  |
| 11. | Do you rent your residence?   | ■ No.   | Go to       | line 12.                             |  |   |  |  |  |
|     |   | ☐ Yes.  | Has y       | our landlord obtai                   | ned an eviction judgment agains                          | you and do you want to stay in your residence?  |  |  |  |
|     |   |   |             | No. Go to line 1                     | 2.   |   |  |  |  |
|     |   |   |             |                                      |  | ludgment Against You (Form 101A) and file it with this  |  |  |  |

Debtor 1 Timothy Thomas Wharton, Jr.

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| Den | limothy I nomas   | wnarton,                            | , Jr.  | Case number (# known)   |  |  |  |  |
|-----|---|-------------------------------------|--|---|--|--|--|--|
|     |   |                                     |  |   |  |  |  |  |
| Par | Report About Any Bu   | sinesses                            | You Own as a Sole Propri   | etor  |  |  |  |  |
| 12. | Are you a sole proprietor of any full- or part-time business?   | ■ No.                               | Go to Part 4.  |   |  |  |  |  |
|     |   | ☐ Yes.                              | Name and location of bu  | usiness   |  |  |  |  |
|     | A sole proprietorship is a  |                                     |  |   |  |  |  |  |
|     | business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |                                     | Name of business, if any   |   |  |  |  |  |
|     | If you have more than one sole proprietorship, use a separate sheet and attach  |                                     | Number, Street, City, St   | ate & ZIP Code  |  |  |  |  |
|     | it to this petition.  |                                     | Check the appropriate b  | ox to describe your business:   |  |  |  |  |
|     |   |                                     | ☐ Health Care Bus  | iness (as defined in 11 U.S.C. § 101(27A))  |  |  |  |  |
|     |   |                                     | ☐ Single Asset Rea   | al Estate (as defined in 11 U.S.C. § 101(51B))  |  |  |  |  |
|     |   |                                     | ☐ Stockbroker (as  | defined in 11 U.S.C. § 101(53A))  |  |  |  |  |
|     |   |                                     | ☐ Commodity Brok   | ter (as defined in 11 U.S.C. § 101(6))  |  |  |  |  |
|     |   |                                     | ☐ None of the abo  | ve  |  |  |  |  |
| 13. | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a small business<br>debtor?                           | deadlines<br>operation<br>in 11 U.S | e court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure |   |  |  |  |  |
|     | For a definition of small   | No.                                 | No. I am not filing under Chapter 11.  |   |  |  |  |  |
|     | business debtor, see 11 U.S.C. § 101(51D).  | □ No.                               | I am filing under Chapte Code.   | r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy  |  |  |  |  |
|     |   | ☐ Yes.                              | I am filing under Chapte   | r 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |  |  |  |  |
| Par | t 4: Report if You Own or   | Have Any                            | / Hazardous Property or A  | ny Property That Needs Immediate Attention  |  |  |  |  |
| 14. | Do you own or have any  | ■ No.                               |  |   |  |  |  |  |
|     | property that poses or is<br>alleged to pose a threat<br>of imminent and<br>identifiable hazard to                                | ☐ Yes.                              | What is the hazard?  |   |  |  |  |  |
|     | public health or safety? Or do you own any property that needs immediate attention?   |                                     | If immediate attention is needed, why is it needed?  |   |  |  |  |  |
|     |   |                                     | -<br>-   |   |  |  |  |  |
|     | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?                 |                                     | Where is the property?   |   |  |  |  |  |
|     |   |                                     |  | Number, Street, City, State & Zip Code  |  |  |  |  |
|     |   |                                     |  | Number, Street, Oity, State & Zip Code  |  |  |  |  |

Debtor 1 Timothy Thomas Wharton, Jr.

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Deb | tor 1 Timothy Thomas   | Wharton             | Jr.  | Case numb  | Case number (if known)  |  |  |  |  |  |  |
|-----|--|---------------------|--|--|---|--|--|--|--|--|--|
| Par | 6: Answer These Questi   | ions for R          | eporting Purposes  |  |   |  |  |  |  |  |  |
| 16. | What kind of debts do you have?                                | 16a.                |  | onsumer debts? Consumer debts are de conal, family, or household purpose."                 | fined in 11 U.S.C. § 101(8) as "incurred by an  |  |  |  |  |  |  |
|     |  |                     | ☐ No. Go to line 16b.  |  |   |  |  |  |  |  |  |
|     |  |                     | Yes. Go to line 17.  |  |   |  |  |  |  |  |  |
|     |  | 16b.                | Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. |  |   |  |  |  |  |  |  |
|     |  |                     | □ No. Go to line 16c.  |  |   |  |  |  |  |  |  |
|     |  |                     | ☐ Yes. Go to line 17.  |  |   |  |  |  |  |  |  |
|     |  | 16c.                | State the type of debts you o  | owe that are not consumer debts or busine  | ess debts   |  |  |  |  |  |  |
|     |  |                     |  |  |   |  |  |  |  |  |  |
| 17. | Are you filing under Chapter 7?                                | □ No.               | I am not filing under Chapter  | 7. Go to line 18.  |   |  |  |  |  |  |  |
|     | Do you estimate that after any exempt property is excluded and | ■ Yes.              |  | Do you estimate that after any exempt pro-<br>ailable to distribute to unsecured creditors | perty is excluded and administrative expenses s?  |  |  |  |  |  |  |
|     | administrative expenses  |                     | ■ No   |  |   |  |  |  |  |  |  |
|     | are paid that funds will<br>be available for                   |                     | □ Yes  |  |   |  |  |  |  |  |  |
|     | distribution to unsecured creditors?                           |                     |  |  |   |  |  |  |  |  |  |
| 18. | How many Creditors do  | <b>■</b> 1-49       |  | □ 1,000-5,000  | □ 25,001-50,000   |  |  |  |  |  |  |
|     | you estimate that you owe?                                     | ☐ 50-99             |  | <b>5001-10,000</b>   | <b>5</b> 0,001-100,000  |  |  |  |  |  |  |
|     |  | ☐ 100-1             |  | □ 10,001-25,000  | ☐ More than100,000  |  |  |  |  |  |  |
|     |  | 200-9               | 99   |  |   |  |  |  |  |  |  |
| 19. | How much do you estimate your assets to                        | □ \$0 - \$          | •  | □ \$1,000,001 - \$10 million   | □ \$500,000,001 - \$1 billion   |  |  |  |  |  |  |
|     | be worth?  |                     | 01 - \$100,000   | □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million                               | □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion  |  |  |  |  |  |  |
|     |  |                     | 001 - \$500,000<br>001 - \$1 million   | □ \$100,000,001 - \$100 million  | ☐ \$10,000,0001 - \$50 billion  |  |  |  |  |  |  |
| 20. | How much do you  | □ \$0 - \$          | 50,000   | □ \$1,000,001 - \$10 million   | □ \$500,000,001 - \$1 billion   |  |  |  |  |  |  |
|     | estimate your liabilities to be?                               |                     | 001 - \$100,000  | □ \$10,000,001 - \$50 million  | □ \$1,000,000,001 - \$10 billion  |  |  |  |  |  |  |
|     | to be:   |                     | 001 - \$500,000  | □ \$50,000,001 - \$100 million   | □ \$10,000,000,001 - \$50 billion   |  |  |  |  |  |  |
|     |  | <b>□</b> \$500,     | 001 - \$1 million  | □ \$100,000,001 - \$500 million  | ☐ More than \$50 billion  |  |  |  |  |  |  |
| Par | 7: Sign Below  |                     |  |  |   |  |  |  |  |  |  |
| For | you  | I have ex           | amined this petition, and I dec  | clare under penalty of perjury that the info   | rmation provided is true and correct.   |  |  |  |  |  |  |
|     |  |                     |  | , I am aware that I may proceed, if eligible elief available under each chapter, and I c   | e, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.                                  |  |  |  |  |  |  |
|     |  |                     |  | not pay or agree to pay someone who is ne notice required by 11 U.S.C. § 342(b).           | pay or agree to pay someone who is not an attorney to help me fill out this otice required by 11 U.S.C. § 342(b). |  |  |  |  |  |  |
|     |  | I request           | relief in accordance with the o  | chapter of title 11, United States Code, sp  | ecified in this petition.   |  |  |  |  |  |  |
|     |  | bankrupt<br>and 357 | cy case can result in fines up   |  | or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,                           |  |  |  |  |  |  |
|     |  |                     | othy Thomas Wharton, Jr<br>y Thomas Wharton, Jr.   | Signature of Debt  | for 2   |  |  |  |  |  |  |
|     |  |                     | e of Debtor 1  | Signature of Debt  |   |  |  |  |  |  |  |
|     |  | Executed            | on August 26, 2016   | Executed on  |   |  |  |  |  |  |  |
|     |  |                     | MM / DD / YYYY   | MI   | M / DD / YYYY   |  |  |  |  |  |  |

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| Debtor 1 Timothy TI | homas Wharton, Jr. | Case number (if known) |
|---------------------|--------------------|------------------------|

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ David Beste                        | Date          | August 26, 2016          |
|--|---------------|--------------------------|
| Signature of Attorney for Debtor       |               | MM / DD / YYYY           |
| David Beste                            |               |                          |
| Printed name                           |               |                          |
| Law Office of Cricket Browne, LLC      |               |                          |
| Firm name                              |               |                          |
| 117 East Main Street                   |               |                          |
| Elkton, MD 21921                       |               |                          |
| Number, Street, City, State & ZIP Code |               |                          |
| Contact phone 410-398-1991             | Email address | dbeste@powerhouselaw.com |
| Bar number & State                     |               | <del></del>              |

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| -HII   | in this information to identify w                                     | Nur easo:                       |   |              |                                 |
|--------|---|---------------------------------|---|--------------|---------------------------------|
|        | in this information to identify you tor 1 Timothy Thom                |                                 |   |              |                                 |
| Der    | First Name  | Middle Name                     | Last Name   |              |                                 |
|        | tor 2 use if, filing) First Name                                      | Middle Name                     | Last Name   |              |                                 |
| Uni    | ed States Bankruptcy Court for th                                     | e: DISTRICT OF MARYLA           | ND  |              |                                 |
|        | e number  |                                 |   |              |                                 |
| (if kn |   |                                 |   | _            | ck if this is an<br>nded filing |
| Su     |   |                                 | nd Certain Statistical Information are filing together, both are equally responsible f                | or supply    | 12/15                           |
| info   | mation. Fill out all of your sche                                     | dules first; then complete th   | e information on this form. If you are filing amend<br>the box at the top of this page.               |              |                                 |
| Par    | 1: Summarize Your Assets  |                                 |   |              |                                 |
|        |   |                                 |   |              | assets<br>of what you own       |
| 1.     | Schedule A/B: Property (Officia<br>1a. Copy line 55, Total real estat |                                 |   | \$           | 159,093.00                      |
|        | 1b. Copy line 62, Total personal                                      | property, from Schedule A/B     |   | \$           | 19,098.50                       |
|        | 1c. Copy line 63, Total of all prop                                   | perty on Schedule A/B           |   | \$           | 178,191.50                      |
| Par    | 2: Summarize Your Liabilitie  | es                              |   |              |                                 |
|        |   |                                 |   |              | liabilities<br>nt you owe       |
| 2.     | Schedule D: Creditors Who Have 2a. Copy the total you listed in C     |                                 | (Official Form 106D) the bottom of the last page of Part 1 of Schedule D                              | \$           | 180,361.86                      |
| 3.     | Schedule E/F: Creditors Who Ha<br>3a. Copy the total claims from F    |                                 | l Form 106E/F)<br>s) from line 6e of <i>Schedule E/F</i>  | \$           | 0.00                            |
|        | 3b. Copy the total claims from F                                      | art 2 (nonpriority unsecured cl | laims) from line 6j of Schedule E/F   | \$           | 25,745.16                       |
|        |   |                                 | Your total liabilities  | \$           | 206,107.02                      |
| Par    | 3: Summarize Your Income  | and Expenses                    |   |              |                                 |
| 4.     | Schedule I: Your Income (Official Copy your combined monthly income)  | ,                               | <i>I</i>  | \$           | 3,321.56                        |
| 5.     | Schedule J: Your Expenses (Off Copy your monthly expenses fro         |                                 |   | \$           | 3,333.31                        |
| Par    | 4: Answer These Questions   | for Administrative and Stati    | stical Records  |              |                                 |
| 6.     | Are you filing for bankruptcy u  ☐ No. You have nothing to re         | •                               | heck this box and submit this form to the court with yo   | our other so | chedules.                       |
| 7.     | ■ Yes What kind of debt do you have                                   | ?                               |   |              |                                 |
|        |   |                                 | debts are those "incurred by an individual primarily for g for statistical purposes. 28 U.S.C. § 159. | a persona    | ıl, family, or                  |
|        | Your debts are not primal the court with your other sc                |                                 | ve nothing to report on this part of the form. Check this   | s box and    | submit this form to             |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1 Timothy Thomas Wharton, Jr.

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

662.68

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total claim |      |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following:   |             |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$          | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$          | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$          | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$          | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$          | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$         | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$          | 0.00 |

|             |   | Ce  | ise 10-2130                          | ,,  | ו טטכ    | 1 110            | u 06/20     | J/10 F   | ige io c     | JI JZ  |      |                                     |
|-------------|---|---|--------------------------------------|---|----------|------------------|-------------|--|--------------|--|------|-------------------------------------|
| Fill i      | n this inform   | nation to identify                        | our case and th                      | is filin  | g:       |                  |             |  |              |  |      |                                     |
| Debt        | tor 1   |   | mas Wharton,                         |   |          |                  |             |  |              |  |      |                                     |
| Debt        | tor 2   | First Name                                | Middle                               | Name  |          | Lá               | ast Name    |  |              |  |      |                                     |
|             | ise, if filing)   | First Name                                | Middle                               | Name  |          | La               | ast Name    |  |              |  |      |                                     |
| Unite       | ed States Ban   | nkruptcy Court for t                      | he: DISTRICT                         | OF MA   | RYLAND   | )                |             |  |              |  |      |                                     |
| Case        | e number  |   |                                      |   |          |                  |             |  |              |  |      | Check if this is an                 |
|             |   |   |                                      |   |          |                  |             |  |              |  |      | amended filing                      |
| Off         | icial For   | rm 106A/B                                 |                                      |   |          |                  |             |  |              |  |      |                                     |
| Sc          | hedule  | e A/B: Pr                                 | operty                               |   |          |                  |             |  |              |  |      | 12/15                               |
| Part        |   | Each Residence, Bu                        |                                      |   |          |                  |             |  |              |  |      |                                     |
| 1.1         | Yes. Where is the property?  23 Mule Deer Court  Street address, if available, or other description |   |                                      | the amount  |          |                  |             | educt secured claims or exemptions. Put<br>unt of any secured claims on <i>Schedule D:</i> |              |  |      |                                     |
|             |   |   |                                      | Duplex or multi-unit building Creditors  Condominium or cooperative |          |                  |             | s Who Have Claims Secured by Property.   |              |  |      |                                     |
|             | Elkton  | MD  | 21921-0000                           |   |          | ctured or i      | mobile hom  | e  | entire pr    |  |      | urrent value of the ortion you own? |
|             | City  | State                                     | ZIP Code                             |   | Timesha  | ent prope<br>are | rty         |  | Describe     |  |      | \$159,093.00<br>ownership interest  |
|             |   |   |                                      | (Such as i  |          |                  |             | tate), if known.   | ,,           |  |      |                                     |
|             | Cecil   |   |                                      |   |          | -                |             |  |              |  |      |                                     |
|             | County  |   |                                      |   | At least | one of the       |             | nd another   | ☐ (see       | eck if this is con<br>instructions)<br>local | nmur | nity property                       |
| 2. <i>I</i> | Add the dolla   | ar value of the por<br>ave attached for P | tion you own fo<br>art 1. Write that | r all of<br>numbe   | your ent | ries fror        | m Part 1, i | ncluding any   | / entries fo | or<br>=>                                     |      | \$159,093.00                        |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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| Debt          | or 1 Timothy Thomas Wharton, Ju   | ·. Ca  | ase number (if known)      |  |
|---------------|---|--|----------------------------|--|
| 3. <b>C</b> a | ırs, vans, trucks, tractors, sport utility ve   | chicles, motorcycles   |                            |  |
|               | No  |  |                            |  |
|               | Yes   |  |                            |  |
|               |   |  |                            |  |
| 3.1           | Make: Mitsubishi  | Who has an interest in the property? Check one   |                            | I claims or exemptions. Put ured claims on Schedule D:       |
|               | Model: Lancer   | ■ Debtor 1 only  |                            | Claims Secured by Property.                                  |
|               | Year: <b>2009</b>   | Debtor 2 only  | Current value of the       | Current value of the   |
|               | Approximate mileage: 81,000   | Debtor 1 and Debtor 2 only   | entire property?           | portion you own?   |
|               | Other information:  | At least one of the debtors and another  |                            |  |
|               | Location: 23 Mule Deer Court,<br>Elkton MD 21921  | Check if this is community property (see instructions)   | \$3,443.00                 | \$3,443.00   |
| 3.2           | Make: Toyota  | Who has an interest in the property? Check one   |                            | I claims or exemptions. Put                                  |
|               | Model: Carolla  | ■ Debtor 1 only  |                            | ured claims on Schedule D: Claims Secured by Property.       |
|               | Year: <b>2015</b>   | Debtor 2 only  | Current value of the       | Current value of the   |
|               | Approximate mileage: 19,000   | Debtor 1 and Debtor 2 only   | entire property?           | portion you own?   |
|               | Other information:  | ☐ At least one of the debtors and another  |                            |  |
|               | Location: 23 Mule Deer Court,<br>Elkton MD 21921  | Check if this is community property (see instructions)   | \$10,987.00                | \$10,987.00  |
|               |   | rn for all of your entries from Part 2, including ar<br>that number here   |                            | \$14,430.00  |
| Part :        | 3: Describe Your Personal and Household It  | oms  |                            |  |
|               | ou own or have any legal or equitable in  |  |                            | Current value of the   |
|               |   | , c  |                            | portion you own? Do not deduct secured claims or exemptions. |
| E.            | busehold goods and furnishings<br>xamples: Major appliances, furniture, linens<br>No<br>Yes. Describe     | s, china, kitchenware  |                            |  |
|               | res. Describe   |  |                            |  |
|               |   | household goods and furnishings  |                            | \$750.00   |
|               |   | household goods and furnishings  |                            | \$750.00   |
| E             | ectronics examples: Televisions and radios; audio, vid including cell phones, cameras, n                  | eo, stereo, and digital equipment; computers, printe   | ers, scanners; music colle | <u> </u>   |
| E             | Miscellaneous ectronics examples: Televisions and radios; audio, vid                                      | eo, stereo, and digital equipment; computers, printe   | ers, scanners; music colle | <u> </u>   |
| 8. <b>C</b> c | ectronics xamples: Televisions and radios; audio, vid including cell phones, cameras, r. No Yes. Describe | eo, stereo, and digital equipment; computers, printe<br>nedia players, games<br>prints, or other artwork; books, pictures, or other ar |                            | ctions; electronic devices                                   |

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| Debtor 1          | Timothy Thomas W                             | harton, Jr.            | Case nur  | nber (if known)   |
|-------------------|--|------------------------|---|---|
|                   | musical instruments                          |                        | obby equipment; bicycles, pool tables, golf clubs   | , skis; canoes and kayaks; carpentry tools;                                       |
|                   | es. Describe                                 |                        |   |   |
| ■ No              | mples: Pistols, rifles, shotgu               | ns, ammunition, and    | related equipment   |   |
| 11. <b>Clo</b> tl |  |                        |   |   |
| Exa<br>□ No       | <i>mples:</i> Everyday clothes, fu           | rs, leather coats, des | gner wear, shoes, accessories   |   |
| ■ Ye              | s. Describe                                  |                        |   |   |
|                   | Misce  | ellaneous wearing      | apparel   | \$150.00  |
| ■ No              | <i>mples:</i> Everyday jewelry, co           | stume jewelry, enga    | gement rings, wedding rings, heirloom jewelry, wa   | tches, gems, gold, silver   |
|                   | farm animals<br>mples: Dogs, cats, birds, ho | rses                   |   |   |
|                   | es. Describe                                 |                        |   |   |
| ■ No              | -  | -                      | not already list, including any health aids you   | did not list  |
|                   |  |                        | art 3, including any entries for pages you have   | * attached \$900.00   |
|                   | Describe Your Financial Asse                 |                        |   |   |
| Do you            | own or have any legal or e                   | equitable interest in  | any of the following?   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No              | mples: Money you have in y                   |                        | me, in a safe deposit box, and on hand when you   | file your petition  |
| Exa               | institutions. If you ha                      |                        | unts; certificates of deposit; shares in credit union with the same institution, list each. | ns, brokerage houses, and other similar   |
| □ No<br>■ Ye      | )<br>S                                       |                        | Institution name:   |   |
|                   | 17.1.  | Checking               | Wells Fargo   | \$2.50  |
|                   | 17.2.  | Checking               | First Tennessee   | \$2.50  |
|                   | 17.3.  | Checking               | M&T Bank  | \$0.00  |

Official Form 106A/B

Schedule A/B: Property

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| De  | ebtor 1 T                    | imothy Tho      | omas W      | harton, Jr.                                     | Case number (if kr  | nown)                              |
|-----|------------------------------|-----------------|-------------|---|---|------------------------------------|
|     |                              |                 |             |   |   |                                    |
|     |                              |                 | 17.4.       | Savings   | Clinchfield, FCU  | \$0.00                             |
|     |                              |                 | 17.5.       | Checking  | Dover, FCU  | \$0.00                             |
|     |                              |                 | 17.6.       | Checking  | Aberdeen Proving ground, FCU  | \$0.00                             |
| 18. | Examples.                    |                 |             | cly traded stocks<br>ent accounts with bro      | kerage firms, money market accounts   |                                    |
|     | ■ No □ Yes                   |                 |             | Institution or issuer r                         | ame:  |                                    |
| 19. | joint vent                   |                 | ock and     | interests in incorpo                            | rated and unincorporated businesses, including an in  | terest in an LLC, partnership, and |
|     | ■ No □ Yes. Giv              | e specific inf  |             | about them<br>me of entity:                     | % of ownership:   |                                    |
| 20. | Negotiable                   | e instruments   | include ¡   | personal checks, cas                            | ciable and non-negotiable instruments niers' checks, promissory notes, and money orders. Inster to someone by signing or delivering them. |                                    |
|     |                              | e specific info |             | about them<br>uer name:                         |   |                                    |
| 21. | . <b>Retiremen</b> Examples. |                 |             |   | 03(b), thrift savings accounts, or other pension or profit-sh   | aring plans                        |
|     | ■ No □ Yes. List             | each accour     |             | tely.<br>of account:                            | Institution name:   |                                    |
| 22. |                              | of all unuse    | d deposi    | ts you have made so                             | that you may continue service or use from a company public utilities (electric, gas, water), telecommunications co                        | empanies, or others                |
|     | Yes                          |                 |             |   | Institution name or individual:   |                                    |
| 23. | _                            | (A contract fo  | or a perio  | dic payment of mone                             | y to you, either for life or for a number of years)   |                                    |
|     | ■ No<br>□ Yes                | ls              | suer nam    | ne and description.                             |   |                                    |
| 24. | 26 U.S.C. §                  |                 |             | n an account in a qu<br>and 529(b)(1).          | alified ABLE program, or under a qualified state tuitio   | n program.                         |
|     | ■ No<br>□ Yes                | In              | stitution i | name and description                            | . Separately file the records of any interests.11 U.S.C. § 5  | 21(c):                             |
| 25. |                              | uitable or fu   | ture inte   | rests in property (or                           | her than anything listed in line 1), and rights or power  | s exercisable for your benefit     |
|     | ■ No<br>□ Yes. Giv           | e specific inf  | ormation    | about them                                      |   |                                    |
| 26. | Examples.                    |                 |             |   | d other intellectual property ds from royalties and licensing agreements  |                                    |
|     | ■ No<br>□ Yes. Giv           | e specific inf  | ormation    | about them                                      |   |                                    |
| 27. | Examples.                    |                 |             | er general intangible<br>slusive licenses, coop | s<br>erative association holdings, liquor licenses, professional l  | icenses                            |
|     | ■ No                         | re specific inf | ormation    | about them                                      |   |                                    |

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| Ilmothy Inomas wharto  | on, Jr.  |                                 |   |
|--|--|---------------------------------|---|
| Money or property owed to you?   |  |                                 | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. Tax refunds owed to you  ☐ No ☐ Yes. Give specific information about   | them, including whether you already filed the returns ar                                       | nd the tax years                |   |
|  | 2015 income tax refund   | Federal                         | \$2,100.00  |
|  | 2015 DE income tax refund  | State                           | \$1,061.00  |
|  | 2015 MD income tax refund  | State                           | \$82.50   |
|  | 2015 PA income tax refund  | State                           | \$520.00  |
| ■ No □ Yes. Give specific information  30. Other amounts someone owes you  | surance payments, disability benefits, sick pay, vacation made to someone else                 | n pay, workers' compensatio     |   |
| ■ No □ Yes. Name the insurance company Compan  |  | ry:                             | Surrender or refund value:  |
| <ul> <li>32. Any interest in property that is due if you are the beneficiary of a living trusomeone has died.</li> <li>■ No</li> <li>□ Yes. Give specific information</li> </ul> | you from someone who has died ust, expect proceeds from a life insurance policy, or are        | currently entitled to receive p | property because  |
|  | er or not you have filed a lawsuit or made a demand sputes, insurance claims, or rights to sue | for payment                     |   |
| 34. Other contingent and unliquidated of No ☐ Yes. Describe each claim   | claims of every nature, including counterclaims of th  | e debtor and rights to set o    | off claims  |
| 35. Any financial assets you did not alro ■ No □ Yes. Give specific information  | eady list  |                                 |   |

| Debtor 1         | Timothy Thomas Wharton, Jr.  |                             | Case number (if known)       |              |
|------------------|--|-----------------------------|------------------------------|--------------|
|                  | d the dollar value of all of your entries from Part 4, includir<br>Part 4. Write that number here                                |                             |                              | \$3,768.50   |
| Part 5:          | Describe Any Business-Related Property You Own or Have an Inte   | rest In. List any real esta | ate in Part 1.               |              |
| 37. <b>Do yo</b> | ou own or have any legal or equitable interest in any business-relat   | ed property?                |                              |              |
| No.              | Go to Part 6.  |                             |                              |              |
| ☐ Yes            | . Go to line 38.   |                             |                              |              |
|                  | Describe Any Farm- and Commercial Fishing-Related Property You<br>If you own or have an interest in farmland, list it in Part 1. | ı Own or Have an Interes    | st In.                       |              |
| 46. <b>Do y</b>  | ou own or have any legal or equitable interest in any farm-  | or commercial fishin        | ng-related property?         |              |
|                  | lo. Go to Part 7.  |                             |                              |              |
| ΠY               | es. Go to line 47.   |                             |                              |              |
| Part 7:          | Describe All Property You Own or Have an Interest in That Yo   | u Did Not List Above        |                              |              |
|                  | ou have other property of any kind you did not already list mples: Season tickets, country club membership                       | ?                           |                              |              |
| ☐ Ye             | s. Give specific information   |                             |                              |              |
| 54. <b>Ad</b>    | d the dollar value of all of your entries from Part 7. Write th  | at number here              |                              | \$0.00       |
| Part 8:          | List the Totals of Each Part of this Form  |                             |                              |              |
| 55. <b>Pa</b> i  | rt 1: Total real estate, line 2  |                             |                              | \$159,093.00 |
| 56. <b>Pa</b> i  | rt 2: Total vehicles, line 5   | \$14,430.00                 |                              |              |
| 57. <b>Pa</b> i  | rt 3: Total personal and household items, line 15  | \$900.00                    |                              |              |
| 58. <b>Pa</b> ı  | rt 4: Total financial assets, line 36  | \$3,768.50                  |                              |              |
| 59. <b>Pa</b> ı  | rt 5: Total business-related property, line 45   | \$0.00                      |                              |              |
| 60. <b>Pa</b> i  | rt 6: Total farm- and fishing-related property, line 52  | \$0.00                      |                              |              |
| 61. <b>Pa</b> ı  | rt 7: Total other property not listed, line 54 +   | \$0.00                      |                              |              |
| 62. <b>Tot</b>   | tal personal property. Add lines 56 through 61   | \$19,098.50                 | Copy personal property total | \$19,098.50  |
| 63. <b>Tot</b>   | tal of all property on Schedule A/B. Add line 55 + line 62   |                             |                              | \$178,191.50 |

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|                     | mation to identify y   |                               |                 |                                      |
|---------------------|------------------------|-------------------------------|-----------------|--------------------------------------|
| Debtor 1            | First Name             | nas Wharton, Jr.  Middle Name | Last Name       |                                      |
| Debtor 2            |                        |                               |                 |                                      |
| (Spouse if, filing) | First Name             | Middle Name                   | Last Name       |                                      |
| United States Ba    | ankruptcy Court for th | ne: DISTRICT OF MARYLA        | ND              |                                      |
| Case number         |                        |                               |                 |                                      |
| (if known)          |                        |                               |                 | ☐ Check if this is an amended filing |
| Official Fo         | orm 106C               |                               |                 |                                      |
| Schedul             | e C: The I             | Property You C                | Claim as Exempt | 4/1                                  |

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identify the Property | <sup>,</sup> You Claim as Exempt |
|-------------------------------|----------------------------------|
|-------------------------------|----------------------------------|

| 1. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. |
|----|---|
|    | ■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)              |

☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the<br>portion you own | Amo | ount of the exemption you claim                                 | Specific laws that allow exemption                    |  |
|--|---|-----|---|---|--|
|  | Copy the value from<br>Schedule A/B     | Che | eck only one box for each exemption.                            |   |  |
| 23 Mule Deer Court Elkton, MD 21921<br>Cecil County                                    | \$159,093.00                            | -   | \$9,176.00  | Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(2) |  |
| Line from Schedule A/B: 1.1  |   |     | 100% of fair market value, up to any applicable statutory limit | 1100.3 11 004(1)(1)(1)(1)(2)                          |  |
| 2009 Mitsubishi Lancer 81,000 miles<br>Location: 23 Mule Deer Court, Elkton            | \$3,443.00                              |     | \$0.00  | Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)       |  |
| MD 21921 Line from Schedule A/B: 3.1   |   |     | 100% of fair market value, up to any applicable statutory limit | 1100. 3 11-304(D)(3)                                  |  |
| 2015 Toyota Carolla 19,000 miles<br>Location: 23 Mule Deer Court, Elkton               | \$10,987.00                             |     | \$0.00  | Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)       |  |
| MD 21921<br>Line from Schedule A/B: 3.2  |   |     | 100% of fair market value, up to any applicable statutory limit | ,   |  |
| Miscellaneous household goods and furnishings  | \$750.00                                |     | \$750.00  | Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)       |  |
| Line from Schedule A/B: <b>6.1</b>   |   |     | 100% of fair market value, up to any applicable statutory limit | ς (λ,   |  |
| Miscellaneous wearing apparel Line from Schedule A/B: 11.1                             | \$150.00                                |     | \$150.00  | Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)       |  |
| Line from Genedate FVD. TTT  |   |     | 100% of fair market value, up to any applicable statutory limit | 1100. 3 11 004(0)(4)                                  |  |

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| Debtor 1 Himothy Hnomas Wharton, Jr.   |  |         | Case number (if known)  |  |
|--|--|---------|---|--|
| Brief description of the property and line on<br>Schedule A/B that lists this property   | Current value of the Amount of the exemption you claim portion you own |         |   | Specific laws that allow exemption                       |
|  | Copy the value from<br>Schedule A/B                                    | Che     | eck only one box for each exemption.                            |  |
| Checking: Wells Fargo Line from Schedule A/B: 17.1   | \$2.50   | •       | \$2.50  | Md. Code Ann., Cts. & Jud.<br>Proc. § 11-504(f)(1)(i)(1) |
| Life from Schedule A/B. 1111   |  |         | 100% of fair market value, up to any applicable statutory limit | 1100.31100-(()(1)(1)(1)                                  |
| Checking: First Tennessee Line from Schedule A/B: 17.2   | \$2.50   |         | \$2.50  | Md. Code Ann., Cts. & Jud.<br>Proc. § 11-504(f)(1)(i)(1) |
|  |  |         | 100% of fair market value, up to any applicable statutory limit |  |
| Checking: M&T Bank Line from Schedule A/B: 17.3  | \$0.00   |         | \$0.00  | Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)          |
|  |  |         | 100% of fair market value, up to any applicable statutory limit | , , , , , , , , , , , , , , , , , , ,                    |
| Savings: Clinchfield, FCU Line from Schedule A/B: 17.4   | \$0.00   |         | \$0.00  | Md. Code Ann., Cts. & Jud.<br>Proc. § 11-504(b)(5)       |
|  |  |         | 100% of fair market value, up to any applicable statutory limit |  |
| Checking: Dover, FCU Line from Schedule A/B: 17.5  | \$0.00   |         | \$0.00  | Md. Code Ann., Cts. & Jud.<br>Proc. § 11-504(b)(5)       |
|  |  |         | 100% of fair market value, up to any applicable statutory limit |  |
| Checking: Aberdeen Proving ground, FCU   | \$0.00   |         | \$0.00  | Md. Code Ann., Cts. & Jud.<br>Proc. § 11-504(b)(5)       |
| Line from Schedule A/B: 17.6   |  |         | 100% of fair market value, up to any applicable statutory limit |  |
| Federal: 2015 income tax refund Line from Schedule A/B: 28.1   | \$2,100.00   |         | \$2,100.00  | Md. Code Ann., Cts. & Jud.<br>Proc. § 11-504(b)(5)       |
|  |  |         | 100% of fair market value, up to any applicable statutory limit | J. Contest   |
| State: 2015 DE income tax refund Line from Schedule A/B: 28.2  | \$1,061.00   |         | \$1,061.00  | Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)    |
|  |  |         | 100% of fair market value, up to any applicable statutory limit |  |
| State: 2015 MD income tax refund Line from Schedule A/B: 28.3  | \$82.50  |         | \$82.50   | Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)    |
|  |  |         | 100% of fair market value, up to any applicable statutory limit |  |
| State: 2015 PA income tax refund Line from Schedule A/B: 28.4  | \$520.00   |         | \$520.00  | Md. Code Ann., Cts. & Jud.<br>Proc. § 11-504(f)(1)(i)(1) |
|  |  |         | 100% of fair market value, up to any applicable statutory limit |  |
| 3. Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3  ■ No □ Yes. Did you acquire the property covere □ No □ Yes | B years after that for ca  | ases fi |   |  |

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| Fill in this informati                  | on to identify you             | r case:  |                            |  |                          |
|---|--------------------------------|--|----------------------------|--|--------------------------|
|   |                                |  |                            |  |                          |
|   | Timothy Thoma First Name       | s Wharton, Jr.  Middle Name Last Nam   |                            |  |                          |
|   | -iist Name                     | Middle Name Last Nam   | е                          |  |                          |
| Debtor 2<br>(Spouse if, filing)         | First Name                     | Middle Name Last Nam   | e                          |  |                          |
| United States Bankru                    | uptcy Court for the:           | DISTRICT OF MARYLAND   |                            |  |                          |
| Case number                             |                                |  |                            |  |                          |
| (if known)                              |                                |  |                            | ☐ Check                                      | if this is an            |
|   |                                |  |                            | ameno  | ed filing                |
| 00000                                   | 000                            |  |                            |  |                          |
| Official Form 1                         | <u>06D</u>                     |  |                            |  |                          |
| Schedule Da                             | Creditors                      | Who Have Claims Secu   | red by Propert             | У  | 12/15                    |
|   |                                | If two married people are filing together, both a<br>out, number the entries, and attach it to this for  |                            |  |                          |
| 1. Do any creditors hav                 | e claims secured by            | your property?   |                            |  |                          |
| ☐ No. Check thi                         | s box and submit tl            | nis form to the court with your other schedule   | s. You have nothing else t | o report on this form.                       |                          |
| Yes Fill in all                         | of the information             | helow  | -                          | ·  |                          |
|   | ecured Claims                  | ociow.   |                            |  |                          |
|   |                                |  | . , Column A               | Column B                                     | Column C                 |
| for each claim. If more                 | than one creditor has          | nore than one secured claim, list the creditor separ<br>a particular claim, list the other creditors in Part 2.<br>cal order according to the creditor's name. |                            | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Dover Fed Credit Union              |                                | Describe the property that secures the claim:  | \$22,326.86                | \$10,987.00                                  | \$11,339.86              |
| Creditor's Name                         |                                | 2015 Toyota Carolla 19,000 miles<br>Location: 23 Mule Deer Court,<br>Elkton MD 21921   |                            |  |                          |
| 1075 Silver L                           | ake Blvd                       | As of the date you file, the claim is: Check all the   | at                         |  |                          |
| Dover, DE 19                            |                                | apply. ☐ Contingent  |                            |  |                          |
| Number, Street, City                    |                                | ☐ Unliquidated   |                            |  |                          |
| , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ,                              | ☐ Disputed   |                            |  |                          |
| Who owes the debt?                      | Check one.                     | Nature of lien. Check all that apply.  |                            |  |                          |
| ■ Debtor 1 only                         |                                | ☐ An agreement you made (such as mortgage of   | or secured                 |  |                          |
| Debtor 2 only                           |                                | car loan)  |                            |  |                          |
| Debtor 1 and Debto                      | r 2 only                       | ☐ Statutory lien (such as tax lien, mechanic's lie   | n)                         |  |                          |
| At least one of the d                   | ebtors and another             | ☐ Judgment lien from a lawsuit   |                            |  |                          |
| ☐ Check if this claim community debt    | relates to a                   | Other (including a right to offset)  |                            |  |                          |
| community desi                          | Opened<br>07/15 Last<br>Active |  |                            |  |                          |
| Date debt was incurre                   | d 6/22/16                      | Last 4 digits of account number 01   | <u> </u>                   |  |                          |
| 2.2 M&T Credit S                        | Services                       | Describe the property that secures the claim:  | \$8,118.00                 | \$3,443.00                                   | \$4,675.00               |
| Creditor's Name                         |                                | 2009 Mitsubishi Lancer 81,000 miles  | _ <del> </del>             |  | <u> </u>                 |
| 1100 Worley                             |                                | Location: 23 Mule Deer Court,  |                            |  |                          |
| Consumer A                              |                                | Elkton MD 21921  |                            |  |                          |
| Management<br>Floor/Attn                | z 2na                          | As of the date you file, the claim is: Check all the apply.  | at                         |  |                          |
| Williamsville                           | , NY 14221                     | Contingent   |                            |  |                          |
| Number, Street, City                    | •                              | Unliquidated   |                            |  |                          |
| Who owes the debt?                      | Check one.                     | ☐ Disputed  Nature of lien. Check all that apply.  |                            |  |                          |
| ■ Debtor 1 only                         |                                | ☐ An agreement you made (such as mortgage of   | or secured                 |  |                          |
| Debtor 2 only                           |                                | car loan)  |                            |  |                          |
| Debtor 1 and Debto                      | r 2 only                       | ☐ Statutory lien (such as tax lien, mechanic's lie   | n)                         |  |                          |
| At least one of the d                   | ebtors and another             | ☐ Judgment lien from a lawsuit   |                            |  |                          |

Official Form 106D

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| Debtor 1          | Timothy T  | homas Wharto                         | on, Jr.   |                | Case number (if know)      |              |        |
|-------------------|--|--------------------------------------|---|----------------|----------------------------|--------------|--------|
|                   | First Name   | Middle Na                            | ame Last Name   |                |                            |              |        |
|                   | if this claim re<br>nunity debt  | elates to a                          | Other (including a right to offset)   |                |                            |              |        |
| Date debt         | was incurred   | Opened<br>10/14 Last<br>Active 07/16 | Last 4 digits of account number   | er <u>0001</u> |                            |              |        |
| 2.3 <b>Per</b>    | nnymac Loa   | an Services                          | Describe the property that secures the  | e claim:       | \$149,917.00               | \$159,093.00 | \$0.00 |
| Credi             | itor's Name  |                                      | 23 Mule Deer Court Elkton, M  | D              |                            |              |        |
| Po<br>Los<br>Numi | n: Bankrup<br>Box 51435<br>s Angeles, C<br>ber, Street, City, S<br>s the debt? C | 7 CA 90051                           | As of the date you file, the claim is: Clapply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply. | neck all that  |                            |              |        |
| ■ Debtor          | ,  |                                      | An agreement you made (such as mo car loan)   | ortgage or se  | ecured                     |              |        |
|                   | 1 and Debtor 2   | only!                                | ☐ Statutory lien (such as tax lien, mech  | anic's lien)   |                            |              |        |
| ☐ At least        | t one of the deb   | otors and another                    | ☐ Judgment lien from a lawsuit  |                |                            |              |        |
|                   | if this claim re<br>nunity debt  | elates to a                          | Other (including a right to offset)   |                |                            |              |        |
| Date debt         | was incurred   | Opened<br>05/15 Last<br>Active 05/16 | Last 4 digits of account number   | er <u>0614</u> |                            |              |        |
| A -1 -1 41        | dellas valva as  |                                      | alama A a aki a mana Waita shat manak   | b              | ¢490.264.6                 | 0.0          |        |
| If this is        |  | of your form, add                    | olumn A on this page. Write that numbe<br>the dollar value totals from all pages.                                       | er nere:       | \$180,361.8<br>\$180,361.8 |              |        |

## Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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|  | 0000   | 10 2 1000   200 1  | 1 1100 00/20/   | 10 1 ago 20 1   | 01 02                  |                               |
|--|--|--|---|---|------------------------|-------------------------------|
| Fill in this infor   | mation to identify your o  | case:  |   |   |                        |                               |
| Debtor 1   | Timothy Thomas   | Wharton Ir   |   |   |                        |                               |
| Debter 1   | First Name   | Middle Name  | Last Name   |   |                        |                               |
| Debtor 2<br>(Spouse if, filing)                              | First Name   | Middle Name  | Last Name   |   |                        |                               |
|  | ankruptcy Court for the:   | DISTRICT OF MARYLAN  |   |   |                        |                               |
|  | ankruptcy Court for the.   | DIGITALOT OF WARTER  | 10  |   |                        |                               |
| Case number  |  |  |   |   |                        |                               |
| (if known)   |  |  |   |   | _                      | k if this is an<br>ded filing |
| Official Form  | ∞ 400⊑/⊑   |  |   |   |                        |                               |
| Official Form  |  | 0 11 11  |   |   |                        | 4045                          |
|  |  | ho Have Unsecu e Part 1 for creditors with PR  |   |   |                        | 12/15                         |
| Schedule D: Credi<br>left. Attach the Co<br>name and case nu | tors Who Have Claims Secuntinuation Page to this page  | ired Leases (Official Form 10 ured by Property. If more spa e. If you have no information  | ace is needed, copy the   | Part you need, fill it ou                             | t, number the entries  | in the boxes on the           |
|  | tors have priority unsecured   |  |   |   |                        |                               |
| □ No. Go to I  | • •  | i ciainis against you:   |   |   |                        |                               |
| Yes.   | r art z.   |  |   |   |                        |                               |
| identify what to<br>possible, list the<br>Part 1. If more    | ype of claim it is. If a claim ha<br>ne claims in alphabetical orde<br>than one creditor holds a par | s. If a creditor has more than one<br>is both priority and nonpriority are<br>according to the creditor's na<br>rticular claim, list the other creditor. | amounts, list that claim he<br>ame. If you have more tha<br>ditors in Part 3. | ere and show both priorit<br>n two priority unsecured | y and nonpriority amou | nts. As much as               |
| (For an explar   | nation of each type of claim, s  | ee the instructions for this form  | n in the instruction bookle   | t.) Total claim                                       | Priority               | Nonpriority                   |
| 2.1  | veller of Memiler d  | l and d allerida ad  |   | Uniona  | amount                 | amount                        |
|  | roller of Maryland reditor's Name  | Last 4 digits of   | account number  | Unknow  | <u>n</u> Unknowr       | <u>Unknown</u>                |
| •  | Office Building  | When was the d   | lebt incurred?  |   |                        |                               |
|  | Preston Street   |  |   |   |                        |                               |
| Room   | 409<br>ore, MD 21201-2384  |  |   |   |                        |                               |
|  | Street City State Zlp Code   | As of the date y   | ou file, the claim is: Che  | eck all that apply                                    |                        |                               |
| Who incurre  | ed the debt? Check one.  | ☐ Contingent   | •   |   |                        |                               |
| Debtor 1   | only   | ☐ Unliquidated   |   |   |                        |                               |
| Debtor 2   | only   | ☐ Disputed   |   |   |                        |                               |
| Debtor 1   | and Debtor 2 only  | Type of PRIORI   | TY unsecured claim:   |   |                        |                               |
| ☐ At least o   | one of the debtors and anothe  | Domestic sup   | oport obligations   |   |                        |                               |
| ☐ Check if   | this claim is for a commun   | nity debt Taxes and ce   | ertain other debts you owe  | the government  |                        |                               |
|  | subject to offset?   | ·  | eath or personal injury while   | <del>-</del>  |                        |                               |
| ■ No   |  | Other. Specif  | ·y  |   |                        |                               |
| ☐ Yes  |  | ŗ···   | Notification Pur  | poses   |                        | _                             |

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| Debto  | Timothy Thomas Wharton, Jr.  | Case  | number (if know)                 |                     |                               |
|--------|--|---|----------------------------------|---------------------|-------------------------------|
| 2.2    | Internal Revenue Service Priority Creditor's Name  | Last 4 digits of account number   | Unknown                          | Unknown             | Unknown                       |
|        | Centralized Insolvency Operation P.O. Box 7346 Philadelphia, PA 19101-7346   | When was the debt incurred?   |                                  |                     |                               |
|        | Number Street City State Zlp Code  | As of the date you file, the claim is: Check a  | all that apply                   |                     |                               |
| v      | /ho incurred the debt? Check one.  | ☐ Contingent  |                                  |                     |                               |
|        | Debtor 1 only  | ☐ Unliquidated  |                                  |                     |                               |
|        | Debtor 2 only  | ☐ Disputed  |                                  |                     |                               |
|        | Debtor 1 and Debtor 2 only   | Type of PRIORITY unsecured claim:   |                                  |                     |                               |
|        | At least one of the debtors and another  | ☐ Domestic support obligations  |                                  |                     |                               |
|        | Check if this claim is for a community debt  | ■ Taxes and certain other debts you owe the   | government                       |                     |                               |
|        | the claim subject to offset?   | $\square$ Claims for death or personal injury while yo                                | ou were intoxicated              |                     |                               |
|        | No   | Other. Specify  |                                  |                     |                               |
|        | Yes  | Notification Purpos   | ses                              |                     |                               |
| 4. Lis | Yes.  It all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each can one creditor holds a particular claim, list the other table. | <ul> <li>m. For each claim listed, identify what type of c</li> </ul>                 | laim it is. Do not list claims a | already included in | Part 1. If more ation Page of |
| 4.1    | Allstate Motor Club Inc.   | Last 4 digits of account number 9696  | 3                                |                     | \$124.00                      |
|        | Nonpriority Creditor's Name PO Box 4363 Carol Stream, IL 60197 Number Street City State Zlp Code Who incurred the debt? Check one.   | When was the debt incurred?  As of the date you file, the claim is: Check             | ck all that apply                |                     | •                             |
|        | Debtor 1 only  | ☐ Contingent  |                                  |                     |                               |
|        | Debtor 2 only  | ☐ Unliquidated  |                                  |                     |                               |
|        | Debtor 1 and Debtor 2 only   | ☐ Disputed  |                                  |                     |                               |
|        | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:  |                                  |                     |                               |
|        | ☐ Check if this claim is for a community debt Is the claim subject to offset?  | ☐ Student loans ☐ Obligations arising out of a separation a report as priority claims | greement or divorce that you     | u did not           |                               |
|        | ■ No   | ☐ Debts to pension or profit-sharing plans,   | , and other similar debts        |                     |                               |
|        | □ Yes  | Other, Specify club fees  |                                  |                     |                               |

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| Debtor | 1 Timothy Thomas Wharton, Jr.   | Case number (if know)  |  |            |  |  |
|--------|---|--|--|------------|--|--|
| 4.2    | APG Federal Credit Union  | Last 4 digits of account number                              | 2820   | \$2,257.00 |  |  |
|        | Nonpriority Creditor's Name Apg Federal Credit Union Po Box 1176 Aberdeen, MD 21001 | When was the debt incurred?                                  | Opened 05/15 Last Active 7/01/16             |            |  |  |
|        | Number Street City State Zlp Code Who incurred the debt? Check one.                 | As of the date you file, the claim i                         | s: Check all that apply                      |            |  |  |
|        | ■ Debtor 1 only   | ☐ Contingent   |  |            |  |  |
|        | ☐ Debtor 2 only   | ☐ Unliquidated   |  |            |  |  |
|        | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |  |            |  |  |
|        | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured                                | d claim:                                     |            |  |  |
|        | ☐ Check if this claim is for a community  | ☐ Student loans  |  |            |  |  |
|        | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |            |  |  |
|        | ■ No  | Debts to pension or profit-sharing                           | g plans, and other similar debts             |            |  |  |
|        | Yes   | Other. Specify Unsecured                                     |  |            |  |  |
| 4.3    | Cb Lancaster  | Last 4 digits of account number                              | 4455   | \$76.00    |  |  |
|        | Nonpriority Creditor's Name 218 West Orange St Lancaster, PA 17603                  | When was the debt incurred?                                  |  |            |  |  |
|        | Number Street City State Zlp Code Who incurred the debt? Check one.                 | As of the date you file, the claim i                         | s: Check all that apply                      |            |  |  |
|        | Debtor 1 only   | ☐ Contingent   |  |            |  |  |
|        | ☐ Debtor 2 only   | ☐ Unliquidated   |  |            |  |  |
|        | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |  |            |  |  |
|        | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured                                | d claim:                                     |            |  |  |
|        | ☐ Check if this claim is for a community  | ☐ Student loans  |  |            |  |  |
|        | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |            |  |  |
|        | ■ No  | ☐ Debts to pension or profit-sharin                          | g plans, and other similar debts             |            |  |  |
|        | Yes   | Other. Specify Medical                                       |  |            |  |  |
| 4.4    | CBC Collections   | Last 4 digits of account number                              | 1577   | \$103.00   |  |  |
|        | Nonpriority Creditor's Name Po Box 5067 Kingsport, TN 37663                         | When was the debt incurred?                                  | Opened 07/12                                 |            |  |  |
|        | Number Street City State Zlp Code Who incurred the debt? Check one.                 | As of the date you file, the claim i                         | s: Check all that apply                      |            |  |  |
|        | Debtor 1 only   | ☐ Contingent   |  |            |  |  |
|        | ☐ Debtor 2 only   | ☐ Unliquidated   |  |            |  |  |
|        | ☐ Debtor 1 and Debtor 2 only  | Disputed   |  |            |  |  |
|        | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured                                | d claim:                                     |            |  |  |
|        | ☐ Check if this claim is for a community  | ☐ Student loans  |  |            |  |  |
|        | debt<br>Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |            |  |  |
|        | ■ No  | Debts to pension or profit-sharing                           | g plans, and other similar debts             |            |  |  |
|        | Yes   | Collection A Other. Specify Memorial H                       | Attorney Unicoi County<br>ospita             |            |  |  |

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| Debto | Timothy Thomas Wharton, Jr.  |   | Case number (if know)                        |            |
|-------|--|---|--|------------|
| 4.5   | CBC Collections  Nonpriority Creditor's Name                         | Last 4 digits of account number   | 1385   | \$28.00    |
|       | Po Box 5067<br>Kingsport, TN 37663                                   | When was the debt incurred?   | Opened 04/15 Last Active<br>11/13            |            |
|       | Number Street City State Zlp Code Who incurred the debt? Check one.  | As of the date you file, the claim i  | is: Check all that apply                     |            |
|       | ■ Debtor 1 only  | ☐ Contingent  |  |            |
|       | Debtor 2 only  | ☐ Unliquidated  |  |            |
|       | Debtor 1 and Debtor 2 only   | ☐ Disputed  |  |            |
|       | $\square$ At least one of the debtors and another                    | Type of NONPRIORITY unsecured   | d claim:                                     |            |
|       | Check if this claim is for a community                               | ☐ Student loans   |  |            |
|       | debt<br>Is the claim subject to offset?                              | report as priority claims   | ration agreement or divorce that you did not |            |
|       | ■ No   | Debts to pension or profit-sharing  | g plans, and other similar debts             |            |
|       | Yes  | Other. Specify Collection   | Attorney Unicoi Water Ut                     |            |
| 4.6   | Clinchfield Fcu Nonpriority Creditor's Name                          | Last 4 digits of account number   | 0002   | \$3,219.60 |
|       | 1038 N Main St<br>Erwin, TN 37650                                    | When was the debt incurred?   | Opened 05/14 Last Active 07/16               |            |
|       | Number Street City State Zlp Code Who incurred the debt? Check one.  | As of the date you file, the claim i  | s: Check all that apply                      |            |
|       | Debtor 1 only  | ☐ Contingent  |  |            |
|       | ☐ Debtor 2 only  | ☐ Unliquidated  |  |            |
|       | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |  |            |
|       | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured   | d claim:                                     |            |
|       | $\square$ Check if this claim is for a community                     | ☐ Student loans   |  |            |
|       | debt Is the claim subject to offset?                                 | ☐ Obligations arising out of a separeport as priority claims                  | ration agreement or divorce that you did not |            |
|       | ■ No   | Debts to pension or profit-sharing  | g plans, and other similar debts             |            |
|       | Yes  | Other. Specify Unsecured  |  |            |
| 4.7   | Comenitycapital/dvdsbr Nonpriority Creditor's Name                   | Last 4 digits of account number   | 4678   | \$1,484.00 |
|       | Comenity Bank Po Box 182125 Columbus, OH 43218                       | When was the debt incurred?   | Opened 06/15 Last Active 05/16               |            |
|       | Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim i  | s: Check all that apply                      |            |
|       | Debtor 1 only  | ☐ Contingent  |  |            |
|       | ☐ Debtor 2 only  | ☐ Unliquidated  |  |            |
|       | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |  |            |
|       | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured   | d claim:                                     |            |
|       | ☐ Check if this claim is for a community debt                        | <ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul> | ration agreement or divorce that you did not |            |
|       | Is the claim subject to offset?                                      | report as priority claims   |  |            |
|       | ■ No   | Debts to pension or profit-sharing  | g plans, and other similar debts             |            |
|       | Yes  | Other Specify Charge Acc  | count  |            |

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| Debto | Timothy Thomas Wharton, Jr.  |   | Case number (if know)                        |            |
|-------|--|---|--|------------|
| 4.8   | ERC  | Last 4 digits of account number                               | 7648   | \$74.19    |
|       | Nonpriority Creditor's Name PO Box 23870                             | When was the debt incurred?                                   |  |            |
|       | Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim i                          | s: Check all that apply                      |            |
|       | Debtor 1 only  | ☐ Contingent  |  |            |
|       | Debtor 2 only  | ☐ Unliquidated  |  |            |
|       | Debtor 1 and Debtor 2 only   | ☐ Disputed  |  |            |
|       | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured                                 | I claim:                                     |            |
|       | ☐ Check if this claim is for a community                             | ☐ Student loans   |  |            |
|       | debt Is the claim subject to offset?                                 | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not |            |
|       | ■ No   | Debts to pension or profit-sharing                            | g plans, and other similar debts             |            |
|       | Yes  | Other. Specify utility  |  |            |
| 4.9   | First Tennessee Bank   | Last 4 digits of account number                               | 2932   | \$5,186.00 |
|       | Nonpriority Creditor's Name  | _   |  |            |
|       | Po Box 1545<br>Memphis, TN 38101                                     | When was the debt incurred?                                   | Opened 09/13 Last Active 06/16               |            |
|       | Number Street City State Zlp Code Who incurred the debt? Check one.  | As of the date you file, the claim i                          | s: Check all that apply                      |            |
|       | Debtor 1 only  | ☐ Contingent  |  |            |
|       | Debtor 2 only  | ☐ Unliquidated  |  |            |
|       | Debtor 1 and Debtor 2 only   | □ Disputed  |  |            |
|       | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured                                 | I claim:                                     |            |
|       | ☐ Check if this claim is for a community                             | ☐ Student loans   |  |            |
|       | debt<br>Is the claim subject to offset?                              | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not |            |
|       | ■ No   | Debts to pension or profit-sharing                            | g plans, and other similar debts             |            |
|       | Yes  | Other. Specify Credit Card                                    |  |            |
| 4.1   | IC Systems, Inc  | Last 4 digits of account number                               | 6349   | \$1,227.00 |
|       | Nonpriority Creditor's Name  | _   |  |            |
|       | 444 Highway 96 East<br>St Paul, MN 55127                             | When was the debt incurred?                                   | Opened 06/16 Last Active 04/16               |            |
|       | Number Street City State Zlp Code Who incurred the debt? Check one.  | As of the date you file, the claim i                          | s: Check all that apply                      |            |
|       | ■ Debtor 1 only  | ☐ Contingent  |  |            |
|       | Debtor 2 only  | ☐ Unliquidated  |  |            |
|       | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |  |            |
|       | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured                                 | l claim:                                     |            |
|       | ☐ Check if this claim is for a community                             | ☐ Student loans   |  |            |
|       | debt<br>Is the claim subject to offset?                              | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not |            |
|       | ■ No   | ☐ Debts to pension or profit-sharing                          | g plans, and other similar debts             |            |
|       | ☐ Yes  | ■ Other. Specify Sprint                                       |  |            |

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| Debtor 1 Timothy Thomas Wharton, Jr. |  | Case number (if know)                                      |   |            |  |  |
|--------------------------------------|--|--|---|------------|--|--|
| 4.1                                  | Mariner Finance, Llc   | Last 4 digits of account number                            | 3512  | \$2,842.00 |  |  |
|                                      | Nonpriority Creditor's Name 8211 Town Center Dr Nottingham, MD 21236                         | When was the debt incurred?                                | Opened 7/15/15 Last Active 06/16              |            |  |  |
|                                      | Number Street City State Zlp Code  Who incurred the debt? Check one.                         | As of the date you file, the claim                         | is: Check all that apply                      |            |  |  |
|                                      | ■ Debtor 1 only  | ☐ Contingent   |   |            |  |  |
|                                      | Debtor 2 only  | ☐ Unliquidated   |   |            |  |  |
|                                      | Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |            |  |  |
|                                      | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecure                               | d claim:                                      |            |  |  |
|                                      | ☐ Check if this claim is for a community   | ☐ Student loans  |   |            |  |  |
|                                      | debt Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |            |  |  |
|                                      | No   | Debts to pension or profit-sharing                         | g plans, and other similar debts              |            |  |  |
|                                      | Yes  | Other. Specify Secured                                     |   |            |  |  |
| 4.1                                  | NCAC   | Last 4 digits of account number                            | 9307  | \$765.83   |  |  |
|                                      | Nonpriority Creditor's Name PO Box 515489 Dallas, TX 75251-5489                              | When was the debt incurred?                                |   |            |  |  |
|                                      | Number Street City State Zlp Code  Who incurred the debt? Check one.                         | As of the date you file, the claim                         | is: Check all that apply                      |            |  |  |
|                                      | Debtor 1 only  | ☐ Contingent   |   |            |  |  |
|                                      | Debtor 2 only  | ☐ Unliquidated   |   |            |  |  |
|                                      | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |            |  |  |
|                                      | At least one of the debtors and another  | Type of NONPRIORITY unsecure                               | d claim:                                      |            |  |  |
|                                      | ☐ Check if this claim is for a community   | Student loans  |   |            |  |  |
|                                      | debt Is the claim subject to offset?   | report as priority claims                                  | aration agreement or divorce that you did not |            |  |  |
|                                      | No   | Debts to pension or profit-sharing                         |   |            |  |  |
|                                      | Yes  | Other. Specify Huntley Glo                                 | en credit                                     |            |  |  |
| 4.1                                  | Nemour Children's Clinic   | Last 4 digits of account number                            | 4813  | \$2,569.75 |  |  |
|                                      | Nonpriority Creditor's Name Alfred I.DuPont Hospital PO Box 740198                           | When was the debt incurred?                                | 1/5/15 - 1/8/15                               |            |  |  |
|                                      | Atlanta, GA 30374-0198  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                         | is: Check all that apply                      |            |  |  |
|                                      | Debtor 1 only  | ☐ Contingent   |   |            |  |  |
|                                      | ☐ Debtor 2 only  | ☐ Unliquidated   |   |            |  |  |
|                                      | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |            |  |  |
|                                      | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecure                               | d claim:                                      |            |  |  |
|                                      | ☐ Check if this claim is for a community debt  | ☐ Student loans ☐ Obligations arising out of a sepa        | aration agreement or divorce that you did not |            |  |  |
|                                      | Is the claim subject to offset?  | report as priority claims                                  | · ·   |            |  |  |
|                                      | No   | Debts to pension or profit-sharing                         | g plans, and other similar debts              |            |  |  |
|                                      | Yes  | ■ Other, Specify medical                                   |   |            |  |  |

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| Debt     | or 1 Timothy Thomas Wharton, Jr.   |  | Case number (if know)                        |          |
|----------|--|--|--|----------|
| 4.1<br>4 | Persimmon Creek Service<br>Corporation   | Last 4 digits of account number                            |  | \$398.64 |
|          | Nonpriority Creditor's Name Attn: Aspen Property Management Company P.O. Box 858       | When was the debt incurred?                                | 2015   |          |
|          | Elkton, MD 21922  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                         | s: Check all that apply                      |          |
|          | ■ Debtor 1 only  | ☐ Contingent   |  |          |
|          | Debtor 2 only  | ☐ Unliquidated   |  |          |
|          | Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |          |
|          | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                              | d claim:                                     |          |
|          | ☐ Check if this claim is for a community   | ☐ Student loans  |  |          |
|          | debt Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |          |
|          | ■ No   | Debts to pension or profit-sharing                         | g plans, and other similar debts             |          |
|          | ☐ Yes  | ■ Other. Specify Past due as                               | ssociation assessments                       |          |
| 4.1<br>5 | Resident Data Collecti   | Last 4 digits of account number                            | 07N1   | \$765.00 |
|          | Nonpriority Creditor's Name  |  | On an ad 00/40 L and Andina                  |          |
|          | Po Box 515489<br>Dallas, TX 75251  | When was the debt incurred?                                | Opened 03/16 Last Active 05/15               |          |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one.                   | As of the date you file, the claim i                       | s: Check all that apply                      |          |
|          | Debtor 1 only  | ☐ Contingent   |  |          |
|          | Debtor 2 only  | ☐ Unliquidated   |  |          |
|          | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |          |
|          | $\square$ At least one of the debtors and another                                      | Type of NONPRIORITY unsecured                              | d claim:                                     |          |
|          | ☐ Check if this claim is for a community debt  |  | ration agreement or divorce that you did not |          |
|          | Is the claim subject to offset?  | report as priority claims                                  |  |          |
|          | No   | Debts to pension or profit-sharin                          |  |          |
|          | ☐ Yes  | Other. Specify Collection                                  | Attorney Huntley Glen                        |          |
| 4.1<br>6 | Singerly Fire Company  | Last 4 digits of account number                            | 5241   | \$607.87 |
|          | Nonpriority Creditor's Name P.O. Box 638423 Cincinnati, OH 45263-8423                  | When was the debt incurred?                                | 4/20/16                                      |          |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one.                   | As of the date you file, the claim i                       | s: Check all that apply                      |          |
|          | Debtor 1 only  | ☐ Contingent   |  |          |
|          | Debtor 2 only  | ☐ Unliquidated   |  |          |
|          | Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |          |
|          | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                              | d claim:                                     |          |
|          | ☐ Check if this claim is for a community debt  | ☐ Student loans ☐ Obligations arising out of a sepa        | ration agreement or divorce that you did not |          |
|          | Is the claim subject to offset?  | report as priority claims                                  | ,  |          |
|          | ■ No   | ☐ Debts to pension or profit-sharin                        | g plans, and other similar debts             |          |
|          | ☐ Yes  | Other Specify medical                                      |  |          |

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| Debto    | Timothy Thomas Wharton, Jr.  |   |  |            |
|----------|--|---|--|------------|
| 4.1<br>7 | Stellar Recovery Inc   | Last 4 digits of account number                                   | 9632   | \$154.00   |
|          | Nonpriority Creditor's Name 1327 Hwy 2 W Suite 100 Kalispell, MT 59901 Number Street City State Zlp Code | When was the debt incurred?  As of the date you file, the claim i | Opened 04/16 Last Active 12/15 s: Check all that apply |            |
|          | Who incurred the debt? Check one.  |   |  |            |
|          | ■ Debtor 1 only  | ☐ Contingent  |  |            |
|          | Debtor 2 only  | ☐ Unliquidated  |  |            |
|          | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another                                   | ☐ Disputed  Type of NONPRIORITY unsecured                         | d claim:   |            |
|          | ☐ Check if this claim is for a community   | ☐ Student loans   |  |            |
|          | debt<br>Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims      | ration agreement or divorce that you did not           |            |
|          | ■ No   | Debts to pension or profit-sharing                                |  |            |
|          | Yes  | Other. Specify Collection   | Attorney Comcast                                       |            |
| 4.1<br>8 | Syncb/HH Gregg  Nonpriority Creditor's Name  | Last 4 digits of account number                                   | 0279   | \$654.00   |
|          | Po Box 103104<br>Roswell, GA 30076   | When was the debt incurred?                                       | Opened 03/11 Last Active 07/16                         |            |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.                                      | As of the date you file, the claim                                | s: Check all that apply                                |            |
|          | Debtor 1 only  | ☐ Contingent  |  |            |
|          | ☐ Debtor 2 only  | ☐ Unliquidated  |  |            |
|          | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |  |            |
|          | $\square$ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                     | d claim:   |            |
|          | ☐ Check if this claim is for a community   | Student loans   |  |            |
|          | debt Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims        |  |            |
|          | ■ No   | Debts to pension or profit-sharin                                 |  |            |
|          | Yes  | Other. Specify Charge Acc   | count  |            |
| 4.1<br>9 | United Consumer Financial<br>Services  | Last 4 digits of account number                                   | 9999   | \$1,032.28 |
|          | Nonpriority Creditor's Name  865 Bassett Rd  Westlake, OH 44145  | When was the debt incurred?                                       | Opened 11/14 Last Active 06/16                         |            |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.                                      | As of the date you file, the claim is: Check all that apply       |  |            |
|          | Debtor 1 only  | ☐ Contingent  |  |            |
|          | Debtor 2 only  | ☐ Unliquidated  |  |            |
|          | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |  |            |
|          | $\square$ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                     |  |            |
|          | Check if this claim is for a community   | Student loans   |  |            |
|          | debt Is the claim subject to offset? —   | report as priority claims   | ration agreement or divorce that you did not           |            |
|          | No   | Debts to pension or profit-sharing                                |  |            |
|          | ☐ Yes  | Other Specify Installment   | Sales Contract   |            |

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| Debtor             | Timothy Thomas Wharton, Jr.  |  | Case n        | umber (if know)  |                           |
|--------------------|--|--|---------------|--|---------------------------|
| 4.2                | Verizon  | Last 4 digits of account number  | 0001          |  | \$1,299.00                |
|                    | Nonpriority Creditor's Name<br>500 Technology Dr<br>Suite 500<br>Weldon Spring, MO 63304   | When was the debt incurred?  | Open<br>1/31/ | ed 01/10 Last Active<br>16                                 | -                         |
|                    | Number Street City State Zlp Code  | As of the date you file, the claim i   | is: Check     | all that apply   |                           |
|                    | Who incurred the debt? Check one.  |  |               |  |                           |
|                    | Debtor 1 only  | ☐ Contingent   |               |  |                           |
|                    | Debtor 2 only  | ☐ Unliquidated   |               |  |                           |
|                    | Debtor 1 and Debtor 2 only   | Disputed   |               |  |                           |
|                    | At least one of the debtors and another  | Type of NONPRIORITY unsecured  ☐ Student loans   | a ciaim:      |  |                           |
|                    | ☐ Check if this claim is for a community debt  | ☐ Obligations arising out of a sepa  | ration an     | reement or divorce that you did not                        |                           |
|                    | Is the claim subject to offset?  | report as priority claims  | iiaiioii ag   | reement of divorce that you did not                        |                           |
|                    | No   | Debts to pension or profit-sharing   | ig plans, a   | and other similar debts                                    |                           |
|                    | ☐ Yes  | Other. Specify   |               |  | -                         |
|                    | World's Foremost Bank, Na<br>Nonpriority Creditor's Name   | Last 4 digits of account number  | 1961          |  | \$878.00                  |
|                    | 4800 Nw 1st St<br>Ste 300  | When was the debt incurred?  | Open<br>05/16 | ed 10/14 Last Active                                       | -                         |
| -                  | Lincoln, NE 68521  Number Street City State Zlp Code  Who incurred the debt? Check one.  | As of the date you file, the claim i   | is: Check     | all that apply   |                           |
|                    | ■ Debtor 1 only  | ☐ Contingent   |               |  |                           |
|                    | ☐ Debtor 2 only  | ☐ Unliquidated   |               |  |                           |
|                    | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |               |  |                           |
|                    | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured  | d claim:      |  |                           |
|                    | ☐ Check if this claim is for a community   | ☐ Student loans  |               |  |                           |
|                    | debt<br>Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims                                 | ration ag     | reement or divorce that you did not                        |                           |
|                    | ■ No   | Debts to pension or profit-sharing   | •             | and other similar debts                                    |                           |
|                    | Yes  | Other. Specify Credit Card   | ł             |  | -                         |
| Part 3:            | List Others to Be Notified About a D   | ebt That You Already Listed  |               |  |                           |
| is tryir<br>have n | is page only if you have others to be notified<br>ig to collect from you for a debt you owe to s<br>nore than one creditor for any of the debts th<br>d for any debts in Parts 1 or 2, do not fill out | someone else, list the original creditor in<br>hat you listed in Parts 1 or 2, list the addi | Parts 1       | or 2, then list the collection agend                       | y here. Similarly, if you |
|                    | nd Address   | On which entry in Part 1 or Part 2 did you   | _             | •  |                           |
|                    | I Garland & Brittany Panter<br>er Finance LLC  |  |               | Creditors with Priority Unsecured Cla                      |                           |
| 1831 P             | Pulaski Highway<br>DE 19701  | •  | Part 2: (     | Creditors with Nonpriority Unsecured                       | Claims                    |
|                    |  | Last 4 digits of account number  |               |  |                           |
| McMul              | nd Address<br>Ilen & Drury, P.A.   | On which entry in Part 1 or Part 2 did you Line 4.14 of (Check one):                         | -             | riginal creditor?<br>Creditors with Priority Unsecured Cla | ims                       |
| 1504 E             | Richard W. Drury<br>East Joppa Road  | •  | Part 2: 0     | Creditors with Nonpriority Unsecured                       | Claims                    |
| iowso              | on, MD 21286   | Last 4 digits of account number  |               |  |                           |
| Part 4:            | Add the Amounts for Each Type of U   | Jnsecured Claim  |               |  |                           |
|                    | he amounts of certain types of unsecured cl<br>f unsecured claim.  | laims. This information is for statistical re  | eporting      | purposes only. 28 U.S.C. §159. Ad                          | d the amounts for each    |
|                    | 6a. Domestic support obligatio   | ns   | 6a.           | Total Claim \$ 0.00  |                           |
|                    |  |  |               | <b>J.00</b>  | ·<br>                     |

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

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## Debtor 1 Timothy Thomas Wharton, Jr.

| Case | number | (if know |
|------|--------|----------|
|------|--------|----------|

| Total claims |     |   |     |                 |
|--------------|-----|---|-----|-----------------|
| from Part 1  | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$<br>0.00      |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$<br>0.00      |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$<br>0.00      |
|              | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$<br>0.00      |
|              |     |   |     | Total Claim     |
| Total claims | 6f. | Student loans   | 6f. | \$<br>0.00      |
| rom Part 2   | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$<br>0.00      |
|              | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$<br>0.00      |
|              | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$<br>25,745.16 |
|              | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$<br>25,745.16 |

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| Fill in this infor  | mation to identify your  |                      |           |                       |
|---------------------|--------------------------|----------------------|-----------|-----------------------|
| Debtor 1            | Timothy Thomas           | Wharton, Jr.         |           |                       |
|                     | First Name               | Middle Name          | Last Name |                       |
| Debtor 2            |                          |                      |           |                       |
| (Spouse if, filing) | First Name               | Middle Name          | Last Name |                       |
| United States Ba    | ankruptcy Court for the: | DISTRICT OF MARYLAND |           |                       |
| Case number         |                          |                      |           |                       |
| (if known)          |                          |                      |           | ☐ Check if this is an |
|                     |                          |                      |           | amended filing        |

# Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with<br>Name, Number | whom you have the , Street, City, State and ZIF | e contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|---|---------------------|---|
| 2.1 |           |                              |   |                     |   |
|     | Name      |                              |   |                     |   |
|     | Number    | Street                       |   |                     | _                                       |
|     | City      |                              | State   | ZIP Code            | <u> </u>                                |
| 2.2 |           |                              |   |                     |   |
|     | Name      |                              |   |                     |   |
|     | Number    | Street                       |   |                     |   |
|     | City      |                              | State   | ZIP Code            | <del>_</del>                            |
| 2.3 |           |                              |   |                     |   |
|     | Name      |                              |   |                     |   |
|     | Number    | Street                       |   |                     | _                                       |
|     | City      |                              | State   | ZIP Code            | _                                       |
| 2.4 |           |                              |   |                     |   |
|     | Name      |                              |   |                     |   |
|     | Number    | Street                       |   |                     | _                                       |
|     | City      |                              | State   | ZIP Code            | <u> </u>                                |
| 2.5 |           |                              |   |                     |   |
|     | Name      |                              |   |                     | _                                       |
|     | Number    | Street                       |   |                     |   |
|     | City      |                              | State   | ZIP Code            | <u> </u>                                |

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|                        |  |                                |                         |                                       | <u></u>  |
|------------------------|--|--------------------------------|-------------------------|---------------------------------------|--|
| Fill in this           | s information to identify you                                      | case:                          |                         |                                       |  |
| Debtor 1               | Timothy Thomas   |                                |                         |                                       |  |
| Debtor 2               | First Name   | Middle Name                    | Last Name               |                                       |  |
| (Spouse if, fil        | ing) First Name  | Middle Name                    | Last Name               |                                       |  |
| United Sta             | ates Bankruptcy Court for the:                                     | DISTRICT OF MARYLA             | ND                      |                                       |  |
| Case num<br>(if known) | nber   |                                |                         |                                       | ☐ Check if this is an amended filing   |
|                        | al Form 106H   | lobtors                        |                         |                                       | 40/45  |
| Sched                  | dule H: Your Cod   | leptors                        |                         |                                       | 12/15  |
|                        | e and case number (if known you have any codebtors? (If            |                                |                         | as a codebtor.                        |  |
| ■ No<br>□ Ye           |  |                                |                         |                                       |  |
|                        | thin the last 8 years, have yo<br>na, California, Idaho, Louisiana |                                |                         |                                       | ty states and territories include  |
|                        | . Go to line 3.<br>s. Did your spouse, former spo                  | ouse, or legal equivalent live | e with you at the time? |                                       |  |
| in line<br>Form        | e 2 again as a codebtor only                                       | if that person is a guaran     | tor or cosigner. Make   | sure you have listed t                | ng with you. List the person shown<br>he creditor on Schedule D (Official<br>Schedule E/F, or Schedule G to fill |
|                        | Column 1: Your codebtor<br>Name, Number, Street, City, State and 2 | ZIP Code                       |                         | Column 2: The cr<br>Check all schedul | editor to whom you owe the debt es that apply:   |
| 3.1                    |  |                                |                         | ☐ Schedule D. lir                     | ne   |
| <u> </u>               | Name   |                                |                         | ☐ Schedule E/F,                       |  |
|                        |  |                                |                         | ☐ Schedule G, lir                     | ne   |
|                        | Number Street<br>City  | State                          | ZIP Code                | _                                     |  |
| 3.2                    |  |                                |                         | ☐ Schedule D, lir                     | ne   |
|                        | Name   |                                |                         | ☐ Schedule E/F,☐ Schedule G, lir      | line   |
|                        | Number Street  |                                |                         | _                                     |  |
|                        | City   | State                          | ZIP Code                |                                       |  |

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| E:II             | :- 4h:- :- f 4: 4  | - :- tif                         |   |  |            |                               |                                     |   |                                    |                 |
|------------------|--|----------------------------------|---|--|------------|-------------------------------|-------------------------------------|---|------------------------------------|-----------------|
|                  | in this information totor 1                                | Timothy The                      |   |  |            |                               |                                     |   |                                    |                 |
| Deb              | otor 2<br>buse, if filing)                                 |                                  |   |  |            | _                             |                                     |   |                                    |                 |
|                  |  | tcy Court for the                | DISTRICT OF MARY  | LAND   |            |                               |                                     |   |                                    |                 |
|                  | se number  |                                  | Check if this is:  An amended filing  A supplement showing postpetition chapter 13 income as of the following date: |  |            |                               |                                     |   |                                    |                 |
| O                | fficial Form   | 106I                             |   |  |            |                               | MM / DD                             |   | 3                                  |                 |
| Sc               | chedule I:   | Your Inco                        | ome   |  |            |                               |                                     |   |                                    | 12/15           |
| sup <sub> </sub> | plying correct infouse. If you are sepech a separate sheet | ormation. If you parated and you | ible. If two married peo<br>are married and not filii<br>r spouse is not filing wi<br>On the top of any additi      | ng jointly, and your<br>ith you, do not incl | spouse i   | is liv<br>matic               | ing with you, in<br>on about your s | lude in<br>ouse. I                                      | formation about<br>f more space is | your<br>needed, |
| 1.               | Fill in your emplinformation.                              | oyment                           |   | Debtor 1                                     | Debto      | Debtor 2 or non-filing spouse |                                     |   |                                    |                 |
|                  |  | more than one job,               | Employment status   | ☐ Employed                                   | ☐ Employed |                               |                                     | ■ Employed  |                                    |                 |
|                  | attach a separate information about                        |                                  | Linployment status  | ■ Not employed                               | ☐ Not      | ☐ Not employed                |                                     |   |                                    |                 |
|                  | employers.   |                                  | Occupation  |  |            |                               | Care                                | Provide   | er                                 |                 |
|                  | Include part-time,<br>self-employed wo                     |                                  | Employer's name   |  |            |                               | Calve<br>LLC                        | rt Mano   | or Healthcare (                    | Center          |
|                  | Occupation may i<br>or homemaker, if                       |                                  | Employer's address  |  |            |                               | 8227                                | 8227 Cloverleaf Dr., Ste. 309<br>Millersville, MD 21108 |                                    |                 |
|                  |  |                                  | How long employed to  | here?  |            |                               |                                     | 2 mon   | ths                                |                 |
| Par              | t 2: Give De   | tails About Mon                  | thly Income   |  |            |                               |                                     |   |                                    |                 |
| spou             | use unless you are   | separated.<br>spouse have mo     | ate you file this form. If your than one employer, co   |  |            |                               |                                     |   |                                    |                 |
|                  | o opaco, anaon a oc  | sparate encerte                  |   |  |            |                               | For Debtor 1                        |   | Debtor 2 or                        |                 |
| 2.               |  |                                  | ry, and commissions (b. calculate what the monthl   |  | 2.         | \$                            | 0.00                                |   | 2,389.34                           |                 |
| 3.               | Estimate and list  | t monthly overti                 | me pay.   |  | 3.         | +\$                           | 0.00                                | +\$   | 91.54                              |                 |
| 4.               | Calculate gross  | Income. Add lin                  | e 2 + line 3.   |  | 4.         | \$                            | 0.00                                | \$  | 2,480.88                           |                 |
|                  |  |                                  |   |  |            |                               |                                     |   |                                    |                 |

Official Form 106I Schedule I: Your Income page 1

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| Debt | or 1           | Timothy Thomas Wharton, Jr.  |       | C        | ase number (if known) | _ |                         |             |          |
|------|----------------|--|-------|----------|-----------------------|---|-------------------------|-------------|----------|
|      |                |  |       |          | F D - 1 ( 4           |   | F D - 1-(               | 0           |          |
|      |                |  |       |          | For Debtor 1          |   | For Debtor non-filing s |             |          |
|      | Cop            | y line 4 here  | 4.    | -        | \$0.00                | _ |                         | ,480.88     | _        |
| 5.   | List           | all payroll deductions:  |       |          |                       |   |                         |             |          |
|      | 5a.            | Tax, Medicare, and Social Security deductions  | 5a.   | . ;      | \$ 0.00               |   | \$                      | 501.32      |          |
|      | 5b.            | Mandatory contributions for retirement plans   | 5b.   |          | \$ 0.00               |   | \$                      | 0.00        | _        |
|      | 5c.            | Voluntary contributions for retirement plans   | 5c.   | . ;      | \$ 0.00               |   | \$                      | 0.00        | -        |
|      | 5d.            | Required repayments of retirement fund loans   | 5d.   | . :      | \$ 0.00               |   | \$                      | 0.00        | _        |
|      | 5e.            | Insurance  | 5e.   |          | \$0.00                |   | \$                      | 0.00        | _        |
|      | 5f.            | Domestic support obligations   | 5f.   |          | \$ 0.00               |   | \$                      | 0.00        | _        |
|      | 5g.            | Union dues   | 5g.   |          | \$ 0.00               |   | \$                      | 0.00        | _        |
|      | 5h.            | Other deductions. Specify:   | _ 5h. |          | · ———————             |   | \$                      | 0.00        | _        |
| 6.   |                | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | 6.    | 9        |                       |   | \$                      | 501.32      | _        |
| 7.   | Caic           | rulate total monthly take-home pay. Subtract line 6 from line 4.   | 7.    | 9        | 0.00                  |   | \$1                     | ,979.56     | _        |
| 8.   | List<br>8a.    | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  | 8a.   | . ;      | \$ 0.00               |   | \$                      | 0.00        |          |
|      | 8b.            | Interest and dividends   | 8b.   | . :      | \$ 0.00               |   | \$                      | 0.00        | _        |
|      | 8c.            | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   | 8c.   | . ;      | \$ 0.00               |   | \$                      | 0.00        | _        |
|      | 8d.            | Unemployment compensation  | 8d.   |          | \$ 1,342.00           |   | \$                      | 0.00        | _        |
|      | 8e.            | Social Security  | 8e.   | . :      | \$ 0.00               |   | \$                      | 0.00        | _        |
|      | 8f.            | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:   | 8f.   |          | \$                    |   | \$                      | 0.00        | _        |
|      | 8g.            | Pension or retirement income   | 8g.   |          | \$ 0.00               |   | \$                      | 0.00        | _        |
|      | 8h.            | Other monthly income. Specify:   | _ 8h. | .+ :     | \$                    | + | \$                      | 0.00        | _        |
| 9.   | Add            | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.    | \$       | 1,342.00              |   | \$                      | 0.0         | 0        |
| 10.  | Calc           | culate monthly income. Add line 7 + line 9.  | 10. 5 | \$       | 1,342.00 + \$         |   | 1,979.56                | = \$        | 3,321.56 |
|      |                | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   |       | <b>-</b> | 1,042.00              |   | 1,010.00                |             | 0,021100 |
| 11.  | State<br>Inclu | e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your refriends or relatives.  Not include any amounts already included in lines 2-10 or amounts that are not a second control of the control of | depe  |          |                       | • | I in <i>Schedul</i>     | e J.<br>+\$ | 0.00     |
| 12.  |                | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines   |       |          |                       |   |                         | \$Combi     |          |
| 13.  | Do v           | rou expect an increase or decrease within the year after you file this form  | ?     |          |                       |   |                         | month       | y income |
| . 0. | ,              | No.  | -     |          |                       |   |                         |             |          |
|      | $\overline{}$  | Yes Explain:   |       |          |                       |   |                         |             |          |

Official Form 106I Schedule I: Your Income page 2

| Eill       | in this informa                                  | tion to identify yo                 | our case.                           |   |                       | Ī                |                                 |                               |
|------------|--|-------------------------------------|-------------------------------------|---|-----------------------|------------------|---------------------------------|-------------------------------|
|            |  |                                     |                                     |   |                       | Oh               | l. if the in in.                |                               |
| Dep        | tor 1  | Timothy Tho                         | mas wn                              | arton, Jr.  |                       |                  | k if this is: An amended filing |                               |
|            | tor 2  |                                     |                                     |   |                       |                  | A supplement show               | ving postpetition chapter     |
| (Spo       | ouse, if filing)                                 |                                     |                                     |   |                       |                  | 13 expenses as of               | the following date:           |
| Unit       | ed States Bankr                                  | uptcy Court for the                 | : DISTRI                            | CT OF MARYLAND  |                       | _                | MM / DD / YYYY                  |                               |
|            | e numbe <b>r</b><br>nown)                        |                                     |                                     |   |                       |                  |                                 |                               |
| Of         | fficial Fo                                       | rm 106J                             |                                     |   |                       |                  |                                 |                               |
|            |  | J: Your                             | Exner                               | ISAS  |                       |                  |                                 | 12/15                         |
| Be<br>info | as complete a<br>ormation. If m<br>mber (if know | and accurate as                     | possible<br>eded, atta<br>y questio | . If two married people ar<br>ich another sheet to this                   |                       |                  |                                 | r supplying correct           |
| 1.         | Is this a joir                                   |                                     | ilolu                               |   |                       |                  |                                 |                               |
|            | ■ No. Go to                                      | = .                                 |                                     |   |                       |                  |                                 |                               |
|            |  |                                     | ın a separ                          | ate household?  |                       |                  |                                 |                               |
|            |  | -                                   | et file Offici                      | al Form 106J-2, <i>Expenses</i>   | for Senarate House    | ahold of Debt    | or 2                            |                               |
|            |  |                                     | _                                   | ari omi 1005-2, <i>Expenses</i>   | Tor Separate House    | shold of Debt    | 01 2.                           |                               |
| 2.         | Do you have                                      | e dependents?                       | ☐ No                                |   |                       |                  |                                 |                               |
|            | Do not list D<br>Debtor 2.                       | ebtor 1 and                         | Yes.                                | Fill out this information for each dependent                              | Dependent's relati    |                  | Dependent's age                 | Does dependent live with you? |
|            | Do not state                                     | the                                 |                                     |   |                       |                  |                                 | □ No                          |
|            | dependents                                       | names.                              |                                     |   | Son                   |                  | 2                               | Yes                           |
|            |  |                                     |                                     |   |                       |                  | _                               | □ No                          |
|            |  |                                     |                                     |   | Daughter              |                  | 5                               | Yes                           |
|            |  |                                     |                                     |   | Nicos                 |                  | 0                               | □ No                          |
|            |  |                                     |                                     |   | Niece                 |                  | 8                               | ■ Yes                         |
|            |  |                                     |                                     |   |                       |                  |                                 | □ No<br>□ Yes                 |
| 3.         | Do your exp                                      | enses include                       |                                     | No  | -                     |                  |                                 | □ 163                         |
|            | •          | f people other t                    | han $\square$                       | Yes   |                       |                  |                                 |                               |
|            | yourself and                                     | d your depende                      | nts? —                              | 100   |                       |                  |                                 |                               |
| exp        | imate your ex                                    |                                     | our bankr                           | y Expenses<br>uptcy filing date unless y<br>y is filed. If this is a supp |                       |                  |                                 |                               |
| Inc        | lude expense                                     | s paid for with                     | non-cash                            | government assistance i   | f vou know            |                  |                                 |                               |
| the        |  | h assistance an                     |                                     | cluded it on Schedule I:  |                       |                  | Your expe                       | enses                         |
| 4.         |  |                                     |                                     | ses for your residence. I   | nclude first mortgage | e                |                                 | 000.03                        |
|            | payments ar                                      | nd any rent for th                  | e ground o                          | or lot.   |                       | 4. \$            |                                 | 999.92                        |
|            | If not includ                                    | led in line 4:                      |                                     |   |                       |                  |                                 |                               |
|            |  | estate taxes                        |                                     |   |                       | 4a. \$           |                                 | 0.00                          |
|            |  | rty, homeowner's                    |                                     |   |                       | 4b. \$<br>4c. \$ |                                 | 0.00                          |
|            |  | maintenance, re<br>owner's associat |                                     | upkeep expenses<br>dominium dues  |                       | 4c. \$<br>4d. \$ |                                 | 100.00<br>0.00                |
| 5.         |  |                                     |                                     | our residence, such as ho   | me equity loans       | 5. \$            |                                 | 0.00                          |

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| Debtor 1 <b>T</b>  | imothy Thomas Wharton, Jr.  | Case num     | ber (if known) |                          |
|--------------------|---|--------------|----------------|--------------------------|
| . Utilities        | <u> </u>  |              |                |                          |
|                    | s:<br>lectricity, heat, natural gas   | 6a.          | \$             | 150.00                   |
|                    | Vater, sewer, garbage collection  | 6b.          | ·              | 40.00                    |
|                    | elephone, cell phone, Internet, satellite, and cable services   | 6c.          | · ·            | 90.00                    |
|                    | other. Specify: <b>Propane</b>  | 6d.          | ·              | 70.00                    |
|                    |   |              | ·              |                          |
|                    | nd housekeeping supplies  | 7.           |                | 700.00                   |
|                    | are and children's education costs  | 8.           | \$             | 25.00                    |
|                    | g, laundry, and dry cleaning  | 9.           | \$             | 50.00                    |
|                    | al care products and services   | 10.          | \$             | 50.00                    |
|                    | I and dental expenses   | 11.          | \$             | 25.00                    |
|                    | ortation. Include gas, maintenance, bus or train fare.  | 12.          | ¢              | 250.00                   |
|                    | nclude car payments.  |              | *              |                          |
|                    | inment, clubs, recreation, newspapers, magazines, and books   | 13.          | ·              | 50.00                    |
|                    | ble contributions and religious donations   | 14.          | \$             | 50.00                    |
| 5. <b>Insura</b> n |   |              |                |                          |
|                    | nclude insurance deducted from your pay or included in lines 4 or 20.   | 150          | ¢              | E0.00                    |
|                    | ife insurance   | 15a.         | ·              | 50.00                    |
|                    | lealth insurance  | 15b.         | ·              | 0.00                     |
|                    | ehicle insurance  | 15c.         | · ·            | 65.00                    |
|                    | Other insurance. Specify:   | 15d.         | \$             | 0.00                     |
|                    | Do not include taxes deducted from your pay or included in lines 4 or 20.   |              | _              |                          |
| Specify:           |   | 16.          | \$             | 0.00                     |
|                    | nent or lease payments:   | 4-7          | •              |                          |
|                    | car payments for Vehicle 1  | 17a.         | ·              | 394.39                   |
|                    | car payments for Vehicle 2  | 17b.         | ·              | 174.00                   |
|                    | Other. Specify:   | 17c.         | \$             | 0.00                     |
|                    | Other. Specify:   | 17d.         | \$             | 0.00                     |
|                    | ayments of alimony, maintenance, and support that you did not report as   |              | Φ.             | 0.00                     |
|                    | ed from your pay on line 5, Schedule I, Your Income (Official Form 106I).   | 18.          | · -            |                          |
| _                  | ayments you make to support others who do not live with you.  |              | \$             | 0.00                     |
| Specify:           |   | 19.          |                |                          |
|                    | eal property expenses not included in lines 4 or 5 of this form or on School  |              |                |                          |
|                    | fortgages on other property   | 20a.         | ·              | 0.00                     |
|                    | leal estate taxes   | 20b.         | ·              | 0.00                     |
|                    | roperty, homeowner's, or renter's insurance   | 20c.         | \$             | 0.00                     |
| 20d. N             | faintenance, repair, and upkeep expenses  | 20d.         | ·              | 0.00                     |
| 20e. H             | lomeowner's association or condominium dues   | 20e.         | \$             | 0.00                     |
| 1. Other: S        | Specify:  | 21.          | +\$            | 0.00                     |
|                    |   |              |                |                          |
|                    | tte your monthly expenses   |              | •              |                          |
|                    | d lines 4 through 21.   |              | \$             | 3,333.31                 |
| 22b. Co            | py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2   |              | \$             |                          |
| 22c. Ad            | d line 22a and 22b. The result is your monthly expenses.  |              | \$             | 3,333.31                 |
|                    | de communication of the contract  |              |                | <u> </u>                 |
|                    | te your monthly net income.   |              | Φ.             | 0.004.50                 |
|                    | copy line 12 (your combined monthly income) from Schedule I.  | 23a.         |                | 3,321.56                 |
| 23b. C             | copy your monthly expenses from line 22c above.   | 23b.         | -\$            | 3,333.31                 |
| -                  |   |              |                |                          |
|                    | subtract your monthly expenses from your monthly income.  | 23c.         | \$             | -11.75                   |
| Т                  | he result is your <i>monthly net income</i> .   | 230.         | Ψ              | 11.70                    |
| A Dave             | expect an increase or decrease in your expenses within the year offer w   | ou filo thio | form?          |                          |
|                    | expect an increase or decrease in your expenses within the year after you note, do you expect to finish paying for your car loan within the year or do you expect you |              |                | or decrease because of a |
|                    | tion to the terms of your mortgage?   | ortgage      | ,              | c. addition because of a |
|                    | , , ,   |              |                |                          |
| ■ No.              |   |              |                |                          |

| Fill in this info               | rmation to identify your                           | case:                    |                            |                        |  |
|---------------------------------|--|--------------------------|----------------------------|------------------------|--|
| Debtor 1                        | Timothy Thomas                                     | Wharton, Jr.             |                            |                        |  |
|                                 | First Name   | Middle Name              | Last Name                  |                        |  |
| Debtor 2<br>(Spouse if, filing) | First Name   | Middle Name              | Last Name                  |                        |  |
| United States B                 | sankruptcy Court for the:                          | DISTRICT OF MARYLA       | ND                         |                        |  |
| Case number (if known)          |  |                          |                            |                        | ☐ Check if this is an amended filing                                       |
| Official For                    | m 106Dec   |                          |                            |                        |  |
| Declara                         | tion About a                                       | n Individual             | <b>Debtor's Sc</b>         | hedules                | 12/15  |
| years, or both.                 | gn Below   |                          | rruptcy case can result ii | n nnes up to \$250,00  | 0, or imprisonment for up to 20  |
| Did you pa                      | ay or agree to pay some                            | one who is NOT an attor  | ney to help you fill out b | ankruptcy forms?       |  |
| ■ No                            |  |                          |                            |                        |  |
| ☐ Yes.                          | Name of person                                     |                          |                            |                        | kruptcy Petition Preparer's Notice,<br>, and Signature (Official Form 119) |
|                                 | alty of perjury, I declare<br>re true and correct. | that I have read the sum | mary and schedules filed   | d with this declaratio | on and   |
| X /s/ Tin                       | nothy Thomas Wharto                                | on, Jr.                  | X                          |                        |  |
| Timot                           | thy Thomas Wharton,<br>ure of Debtor 1             |                          | Signature of               | Debtor 2               |  |
| Date                            | August 26, 2016                                    |                          | Date                       |                        |  |

|                    |   | nation to identify you  |  |   |   |   |  |  |
|--------------------|---|---|--|---|---|---|--|--|
| Dei                | otor 1  | Timothy Thomas  | S Wharton, Jr.  Middle Name                | Last Name   |   |   |  |  |
|                    | otor 2  | -   |  |   |   |   |  |  |
| .                  | ouse if, filing)  | First Name  | Middle Name                                | Last Name   |   |   |  |  |
| Uni                | ted States Bai  | nkruptcy Court for the:   | DISTRICT OF MARYLAN                        | ID  |   |   |  |  |
|                    | se number   |   |  |   |   | Check if this is an mended filing                     |  |  |
| Sta<br>Be a        | as complete a   | of Financial  |  | are filing together, both are                         | equally responsible for sup                                   |   |  |  |
| nun                | nber (if knowr  | n). Answer every que  |  | •   | ,   |   |  |  |
| 1.                 |   | r current marital statu   |  | Lived Belore  |   |   |  |  |
|                    | <ul><li>■ Married</li><li>□ Not mar</li></ul>   | ried  |  |   |   |   |  |  |
| 2.                 | During the la   | ring the last 3 years, have you lived anywhere other than where you live now?                       |  |   |   |   |  |  |
|                    | ■ No □ Yes. Lis   | No<br>Yes. List all of the places you lived in the last 3 years. Do not include where you live now. |  |   |   |   |  |  |
|                    | Debtor 1 Pr   | ior Address:  | Dates Debtor 1 lived there                 | Debtor 2 Prior Ac                                     | Idress:   | Dates Debtor 2<br>lived there                         |  |  |
| <b>3.</b><br>state |   |   |  |   | nity property state or territory ico, Texas, Washington and W |   |  |  |
|                    | ■ No<br>□ Yes. Ma   | ike sure you fill out <i>Scl</i>  | nedule H: Your Codebtors (Of               | fficial Form 106H).                                   |   |   |  |  |
| Par                | t 2 Explai  | n the Sources of You  | r Income                                   |   |   |   |  |  |
| 4.                 | Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. |   |  |   |   |   |  |  |
|                    | □ No  |   |  |   |   |   |  |  |
|                    | Yes. Fill   | in the details.   |  |   |   |   |  |  |
|                    |   |   | Debtor 1                                   |   | Debtor 2  |   |  |  |
|                    |   |   | Sources of income<br>Check all that apply. | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                    | Gross income<br>(before deductions<br>and exclusions) |  |  |
|                    |   | of current year until<br>d for bankruptcy:  | ■ Wages, commissions, bonuses, tips        | \$20,000.00   | ☐ Wages, commissions, bonuses, tips                           |   |  |  |
|                    |   |   | ☐ Operating a business                     |   | ☐ Operating a business  |   |  |  |

Official Form 107

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|---|---|--|---|---|
| Debtor 1 Timothy Thomas Whai  | rton, Jr.   | Case   | e number (if known)   |   |
|   |   |  |   |   |
|   | Debtor 1  |  | Debtor 2  |   |
|   | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions and<br>exclusions)  | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions<br>and exclusions) |
| For last calendar year:<br>(January 1 to December 31, 2015)   | ■ Wages, commissions, bonuses, tips   | \$87,182.00  | ☐ Wages, commissions, bonuses, tips   |   |
|   | ☐ Operating a business  |  | ☐ Operating a business  |   |
|   | ☐ Wages, commissions, bonuses, tips   | \$1,270.00   | ☐ Wages, commissions, bonuses, tips   |   |
|   | Operating a business  |  | ☐ Operating a business  |   |
| For the calendar year before that: (January 1 to December 31, 2014)   | ■ Wages, commissions, bonuses, tips   | \$78,410.00  | ☐ Wages, commissions, bonuses, tips   |   |
|   | ☐ Operating a business  |  | ☐ Operating a business  |   |
| <ul><li>☐ No</li><li>☐ Yes. Fill in the details.</li></ul>  |   |  |   |   |
|   | Debtor 1  |  | Debtor 2  |   |
|   | Sources of income<br>Describe below.  | Gross income from<br>each source<br>(before deductions and<br>exclusions)  | Sources of income<br>Describe below.  | Gross income<br>(before deductions<br>and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy:                                       | Unemployment  | \$5,368.00   |   |   |
|   |   |  |   |   |
| Part 3: List Certain Payments You   | u Made Before You Filed for   | Bankruptcy   |   |   |
| 6. Are either Debtor 1's or Debtor 2  |   |  |   |   |
|   |   | umer debts. Consumer debts   | s are defined in 11 U.S.C. § 10   | 1(8) as "incurred by ar                               |
| individual primarily for a  During the 90 days bef  □ No. Go to line □ Yes List below paid that c             | Debtor 2 has primarily constant personal, family, or househow fore you filed for bankruptcy, do 7.  each creditor to whom you pasteditor. Do not include payment  | umer debts. Consumer debts old purpose." id you pay any creditor a tota id a total of \$6,425* or more ints for domestic support oblig   |   | he total amount you                                   |
| individual primarily for a  During the 90 days bef  □ No. Go to line □ Yes List below paid that conot include | Debtor 2 has primarily constant personal, family, or househow fore you filed for bankruptcy, do 7.  each creditor to whom you pasted to a not include payment payments to an attorney for the personal price of the payments. | umer debts. Consumer debts old purpose."  id you pay any creditor a tota id a total of \$6,425* or more ints for domestic support oblighis bankruptcy case.  | I of \$6,425* or more? n one or more payments and t   | he total amount you<br>and alimony. Also, do          |
| individual primarily for a During the 90 days bef   | Debtor 2 has primarily constant personal, family, or househow fore you filed for bankruptcy, do 7.  each creditor to whom you pasted to a not include payment payments to an attorney for the personal price of the payments. | umer debts. Consumer debts old purpose."  id you pay any creditor a tota id a total of \$6,425* or more i ints for domestic support oblig his bankruptcy case. Its after that for cases filed on umer debts. | I of \$6,425* or more?  n one or more payments and the lations, such as child support a or after the date of adjustment | he total amount you<br>and alimony. Also, do          |

**Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... paid still owe

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

attorney for this bankruptcy case.

 $\square$  Yes

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Case number (if known)

| 7.  | thin 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who siders include your relatives; any general partners; relatives of any general partners; partnerships of which you hich you are an officer, director, person in control, or owner of 20% or more of their voting securities; and a pusiness you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligation mony. |   | u are a genera<br>ny managing a                                      | al partner; corporations gent, including one for |  |                             |
|-----|--|---|--|--|--|-----------------------------|
|     | ■ No   |   |  |  |  |                             |
|     | Yes. List all payments to an insider.  |   |  |  |  |                             |
|     | Insider's Name and Address   | Dates of payment  | Total amount paid  | Amount you still owe                             | Reason for                             | this payment                |
| 8.  | Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos  |   | ments or transfer a  | ny property on a                                 | ecount of a de                         | ebt that benefited an       |
|     | ■ No   |   |  |  |  |                             |
|     | ☐ Yes. List all payments to an insider   |   |  |  |  |                             |
|     | Insider's Name and Address   | Dates of payment  | Total amount paid  | Amount you still owe                             | Reason for Include cred                | this payment<br>itor's name |
| Dai | t 4: Identify Legal Actions, Repossession  | se and Foreclosures                                     |  |  |  |                             |
| 10. | List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.  Case title Case number  Mariner Finance LLC v. Timothy T. Wharton Jr JP17-16-003894  Within 1 year before you filed for bankrupte Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.  Creditor Name and Address   | Nature of the case  Contract  cy, was any of your prope | Justice of the F<br>of the State<br>23730 Shortly F<br>Georgetown, D | Peace Court<br>Road<br>E 19947                   | Status of th  Pending On appe Conclude | <b>e case</b><br>al<br>ed   |
|     | Creditor Name and Address  | Explain what happened                                   |  | Date   |  | property                    |
| 11. | accounts or refuse to make a payment bec No Yes. Fill in the details.  | ause you owed a debt?                                   | -  |  |  | mounts from your            |
|     | Creditor Name and Address  | Describe the action the                                 | creditor took  | Date a taken                                     | action was                             | Amount                      |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  ■ No □ Yes  |   | rty in the possessi  | on of an assigne                                 | e for the bene                         | fit of creditors, a         |

Debtor 1 Timothy Thomas Wharton, Jr.

| Dei | ilmothy Inomas wharton, Jr.   | •          | Case number  | (If Known)                   |                          |
|-----|---|------------|--|------------------------------|--------------------------|
|     |   |            |  |                              |                          |
| Pai | rt 5: List Certain Gifts and Contribution   | าร         |  |                              |                          |
| 13. | ■ No  | ruptcy     | r, did you give any gifts with a total value of more t   | han \$600 per person         | ?                        |
|     | Yes. Fill in the details for each gift.   |            |  |                              |                          |
|     | Gifts with a total value of more than \$60 per person   | 00         | Describe the gifts   | Dates you gave the gifts     | Value                    |
|     | Person to Whom You Gave the Gift and Address:   |            |  |                              |                          |
| 14. | Within 2 years before you filed for bankr ■ No  | uptcy      | , did you give any gifts or contributions with a tota  | al value of more than        | \$600 to any charity?    |
|     | Yes. Fill in the details for each gift or c   | contrib    | oution.  |                              |                          |
|     | Gifts or contributions to charities that 1 more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code |            | Describe what you contributed  | Dates you contributed        | Value                    |
| Pai | rt 6: List Certain Losses   |            |  |                              |                          |
| 15. | Within 1 year before you filed for bankru or gambling?  ■ No □ Yes. Fill in the details.                                    | iptcy (    | or since you filed for bankruptcy, did you lose any  | thing because of the         | it, fire, other disaster |
|     | Describe the property you lost and  | Dose       | cribe any insurance coverage for the loss  | Date of your                 | Value of property        |
|     | how the loss occurred   | Inclu      | Ide the amount that insurance has paid. List pending rance claims on line 33 of Schedule A/B: Property.                                | loss                         | lost                     |
| Pai | rt 7: List Certain Payments or Transfers  | s          |  |                              |                          |
| 16. | consulted about seeking bankruptcy or   | prepa      | did you or anyone else acting on your behalf pay ouring a bankruptcy petition? ers, or credit counseling agencies for services require |                              | rty to anyone you        |
|     | Person Who Was Paid   |            | Description and value of any property  | Date payment                 | Amount of                |
|     | Address Email or website address Person Who Made the Payment, if Not Y  | <b>You</b> | transferred  | or transfer was made         | payment                  |
|     | Law Office of Cricket Browne, LLC<br>117 East Main Street<br>Elkton, MD 21921<br>dbeste@powerhouselaw.com                   |            | Attorney Fees  | 8/1/16                       | \$1,500.00               |
|     | 001 Debtorcc Inc<br>378 Summit Avenue<br>Jersey City, NJ 07306  |            | credit counseling  | 8/22/16                      | \$14.95                  |
| 17. | promised to help you deal with your cree Do not include any payment or transfer that  | ditors     | did you or anyone else acting on your behalf pay of or to make payments to your creditors? isted on line 16.                           | or transfer any prope        | rty to anyone who        |
|     | ■ No □ Yes. Fill in the details.  |            |  |                              |                          |
|     | Person Who Was Paid Address   |            | Description and value of any property transferred  | Date payment or transfer was | Amount of payment        |
|     |   |            |  | made                         |                          |

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| Debtor 1 | Timothy | Thomas | Wharton. | .lr |
|----------|---------|--------|----------|-----|
|          |         |        |          |     |

Case number (if known)

| <ul> <li>Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than p transferred in the ordinary course of your business or financial affairs?</li> <li>Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property include gifts and transfers that you have already listed on this statement.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul> |   |   |                               |                       |   |   |
|--|---|---|-------------------------------|-----------------------|---|---|
|  | Person Who Received Transfer Address  Person's relationship to you  | Description and va<br>property transferre   |                               | payme                 | ibe any property or<br>ents received or debts<br>n exchange   | Date transfer was made                        |
| 19.  | Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote No ☐ Yes. Fill in the details.  |   | y property to a               | self-settle           | d trust or similar device                                     | of which you are a                            |
|  | Name of trust   | Description and va  | alue of the prop              | perty trans           | ferred  | Date Transfer was made                        |
| Par  | t 8: List of Certain Financial Accounts, Inst   | ruments, Safe Deposit   | Boxes, and Sto                | orage Unit            | s   |   |
| 20.  | Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No  Yes. Fill in the details. | other financial accoun  | ts; certificates              | of deposit            |   |   |
|  |   | Last 4 digits of account number   | Type of account or instrument |                       | Date account was<br>closed, sold,<br>moved, or<br>transferred | Last balance<br>before closing or<br>transfer |
| 21.  | Do you now have, or did you have within 1 ye cash, or other valuables?  | ear before you filed for  | bankruptcy, an                | ıy safe dep           | oosit box or other deposi                                     | tory for securities,                          |
|  | ■ No □ Yes. Fill in the details.  |   |                               |                       |   |   |
|  | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)   | Who else had acce<br>Address (Number, State and ZIP Code)                                     |                               | Describe t            | the contents  | Do you still have it?                         |
| 22.  | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?   |   |                               |                       |   |   |
|  | ■ No □ Yes. Fill in the details.  |   |                               |                       |   |   |
|  | Name of Storage Facility<br>Address (Number, Street, City, State and ZIP Code)  | Who else has or had access<br>to it?<br>Address (Number, Street, City,<br>State and ZIP Code) |                               | Describe the contents |   | Do you still have it?                         |
| Par  | t 9: Identify Property You Hold or Control fo   | or Someone Else   |                               |                       |   |   |
| 23.  | Do you hold or control any property that som for someone.   | eone else owns? Inclu   | de any propert                | y you borr            | owed from, are storing f                                      | or, or hold in trust                          |
|  | ■ No □ Yes. Fill in the details.  |   |                               |                       |   |   |
|  | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)  | Where is the prope<br>(Number, Street, City, St<br>Code)                                      |                               | Describe t            | the property  | Value   |
| Par  | t 10: Give Details About Environmental Infor  | mation  |                               |                       |   |   |
| For  | the purpose of Part 10, the following definition  | ns apply:   |                               |                       |   |   |

apply

■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5

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toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Debtor 1 Timothy Thomas Wharton, Jr.

Case number (if known)

|     | regulations controlling the cleanup of these substances, wastes, or material.   |  |   |                    |  |  |  |
|-----|---|--|---|--------------------|--|--|--|
|     | Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.  |  |   |                    |  |  |  |
|     | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.   |  |   |                    |  |  |  |
| Rep | ort all notices, releases, and proceedings tha  | at you know about, regardless of when t                                    | they occurred.  |                    |  |  |  |
| 24. | Has any governmental unit notified you that   | you may be liable or potentially liable υ                                  | under or in violation of an environm                          | ental law?         |  |  |  |
|     | No  |  |   |                    |  |  |  |
|     | Yes. Fill in the details.   |  |   |                    |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | Environmental law, if you know it                             | Date of notice     |  |  |  |
| 25. | Have you notified any governmental unit of  | any release of hazardous material?   |   |                    |  |  |  |
|     | ■ No  |  |   |                    |  |  |  |
|     | ☐ Yes. Fill in the details.   |  |   |                    |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit Address (Number, Street, City, State and ZIP Code)       | Environmental law, if you know it                             | Date of notice     |  |  |  |
| 26. | Have you been a party in any judicial or adn  | ,  | onmental law? Include settlements                             | and orders         |  |  |  |
|     | Thave you been a party in any judicial or dail  | ministrative proceeding under any enviro                                   | ominentariaw . morade settlements                             | una oracio.        |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |  |   |                    |  |  |  |
|     | Case Title Case Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)    | Nature of the case  | Status of the case |  |  |  |
| Par | t 11: Give Details About Your Business or   | Connections to Any Business  |   |                    |  |  |  |
| 27. | Within 4 years before you filed for bankrupt  | cv. did vou own a business or have anv                                     | of the following connections to an                            | v business?        |  |  |  |
|     | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time |  |   |                    |  |  |  |
|     | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)  |  |   |                    |  |  |  |
|     | ☐ A partner in a partnership  |  |   |                    |  |  |  |
|     | ☐ An officer, director, or managing executive of a corporation  |  |   |                    |  |  |  |
|     | ☐ An owner of at least 5% of the voting or equity securities of a corporation   |  |   |                    |  |  |  |
|     | ■ No. None of the above applies. Go to Part 12.   |  |   |                    |  |  |  |
|     | $\hfill \Box$ Yes. Check all that apply above and fill  | in the details below for each business.                                    |   |                    |  |  |  |
|     | Business Name<br>Address  | Describe the nature of the business  | Employer Identification number Do not include Social Security |                    |  |  |  |
|     | (Number, Street, City, State and ZIP Code)  | Name of accountant or bookkeeper   | Dates business existed  |                    |  |  |  |
| 28. | Within 2 years before you filed for bankrupt institutions, creditors, or other parties.   | cy, did you give a financial statement to                                  | anyone about your business? Incl                              | ude all financial  |  |  |  |
|     | ■ No □ Yes. Fill in the details below.  |  |   |                    |  |  |  |
|     | Name<br>Address   | Date Issued  |   |                    |  |  |  |
|     | (Number, Street, City, State and ZIP Code)  |  |   |                    |  |  |  |

Part 12: Sign Below

I have read the answers on this *Statement* of *Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

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| limothy Inomas wharton, Jr.                          | Case number (if known)   |
|--|--|
| •  | g a false statement, concealing property, or obtaining money or property by fraud in connection to \$250,000, or imprisonment for up to 20 years, or both. |
| /s/ Timothy Thomas Wharton, Jr.                      |  |
| Timothy Thomas Wharton, Jr.<br>Signature of Debtor 1 | Signature of Debtor 2  |
| Date August 26, 2016                                 | Date   |
|  | ement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  |
| ■ No   |  |
| ☐ Yes  |  |
| Did you pay or agree to pay someone who is           | not an attorney to help you fill out bankruptcy forms?   |
| ■ No   |  |

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy\_form

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### United States Bankruptcy Court District of Maryland

|        |                                      | District of Maryland                                |                |                       |
|--------|--------------------------------------|---|----------------|-----------------------|
| In re  | Timothy Thomas Wharton, Jr.          |   | Case No.       |                       |
|        |                                      | Debtor(s)   | Chapter        | 7                     |
|        | VERIF                                | FICATION OF CREDITOR MA                             | ATRIX          |                       |
| Γhe ab | ove-named Debtor hereby verifies tha | at the attached list of creditors is true and corre | ct to the best | of his/her knowledge. |
| Date:  | August 26, 2016                      | /s/ Timothy Thomas Wharton, Jr.                     |                |                       |
|        |                                      | Timothy Thomas Wharton, Jr.                         |                |                       |

Signature of Debtor

Allstate Motor Club Inc. PO Box 4363 Carol Stream, IL 60197

APG Federal Credit Union Apg Federal Credit Union Po Box 1176 Aberdeen, MD 21001

Cb Lancaster 218 West Orange St Lancaster, PA 17603

CBC Collections Po Box 5067 Kingsport, TN 37663

Clinchfield Fcu 1038 N Main St Erwin, TN 37650

Comenitycapital/dvdsbr Comenity Bank Po Box 182125 Columbus, OH 43218

Comptroller of Maryland State Office Building 301 W. Preston Street Room 409 Baltimore, MD 21201-2384

Darnell Garland & Brittany Panter Mariner Finance LLC 1831 Pulaski Highway Bear, DE 19701 Dover Fed Credit Union 1075 Silver Lake Blvd Dover, DE 19904

ERC
PO Box 23870
Jacksonville, FL 32241-3870

First Tennessee Bank Po Box 1545 Memphis, TN 38101

IC Systems, Inc 444 Highway 96 East St Paul, MN 55127

Internal Revenue Service Centralized Insolvency Operation P.O. Box 7346 Philadelphia, PA 19101-7346

M&T Credit Services 1100 Worley Drive Consumer Asset Management 2nd Floor/Attn Williamsville, NY 14221

Mariner Finance, Llc 8211 Town Center Dr Nottingham, MD 21236

McMullen & Drury, P.A. Attn: Richard W. Drury 1504 East Joppa Road Towson, MD 21286

NCAC PO Box 515489 Dallas, TX 75251-5489 Nemour Children's Clinic Alfred I.DuPont Hospital PO Box 740198 Atlanta, GA 30374-0198

Pennymac Loan Services Attn: Bankruptcy Po Box 514357 Los Angeles, CA 90051

Persimmon Creek Service Corporation Attn: Aspen Property Management Company P.O. Box 858 Elkton, MD 21922

Resident Data Collecti Po Box 515489 Dallas, TX 75251

Singerly Fire Company P.O. Box 638423 Cincinnati, OH 45263-8423

Stellar Recovery Inc 1327 Hwy 2 W Suite 100 Kalispell, MT 59901

Syncb/HH Gregg Po Box 103104 Roswell, GA 30076

United Consumer Financial Services 865 Bassett Rd Westlake, OH 44145

Verizon 500 Technology Dr Suite 500 Weldon Spring, MO 63304

World's Foremost Bank, Na 4800 Nw 1st St Ste 300 Lincoln, NE 68521